

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 517856

**FILED**  
**Apr 27, 2012**  
**Secretary of State**

**Entity Name:** PROFESSIONAL LEASING AND DEVELOPMENT CORP.

**Current Principal Place of Business:**

25 EAST NINE MILE ROAD  
PENSACOLA, FL 325340119 US

**New Principal Place of Business:**

**Current Mailing Address:**

25 EAST NINE MILE ROAD  
PENSACOLA, FL 325340119 US

**New Mailing Address:**

**FEI Number:** 59-1695701

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

PRIDGEN, HAROLD PRESIDE  
25 EAST NINE MILE ROAD  
PENSACOLA, FL 32534 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: PRIDGEN, HAROLD  
Address: 25 EAST NINE MILE RD  
City-St-Zip: PENSACOLA, FL 32534 US

Title: ST  
Name: PRIDGEN, MARY  
Address: 25 EAST NINE MILE RD  
City-St-Zip: PENSACOLA, FL 32534 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: HAROLD PRIDGEN

PD

04/27/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date