

**2006 LIMITED PARTNERSHIP ANNUAL REPORT (AR)
DUE BY MAY 1, 2006**

FILED
Apr 26, 2006 08:00 AM
Secretary of State

DOCUMENT # A98000002327 1. Entity Name LEECH INVESTMENTS, LTD.					
Principal Place of Business 2787 DICK WILSON DR. SARASOTA FL 34240			Mailing Address 2787 DICK WILSON DR. SARASOTA FL 34240		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 65-0870956 <div style="float: right;"> <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable </div>	
6. Name and Address of Current Registered Agent DARNELL, ROBERT W 2033 MAIN STREET, SUITE 400 SARASOTA FL 34237				7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ FL Zip Code _____	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>					
FILE NOW!!! Fee is \$500. *** After May 1, 2006, fee will be \$900. *** Make check payable to Florida Department of State.					
A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.					
12. GENERAL PARTNER INFORMATION				13. ADDRESS CHANGES ONLY	
DOCUMENT #	NAME			STREET ADDRESS	
NAME	LEECH, JOHN L			CITY-ST-ZIP	
STREET ADDRESS	2787 DICK WILSON DR.				
CITY-ST-ZIP	SARASOTA FL 34240				
DOCUMENT #	NAME			STREET ADDRESS	
NAME	LEECH, M. ELEANOR			CITY-ST-ZIP	
STREET ADDRESS	2787 DICK WILSON DR.				
CITY-ST-ZIP	SARASOTA FL 34240				
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CITY-ST-ZIP					



1st MOORE CR2E003 (10/05)

4. FEI Number **65-0870956** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

1100000535376
05/02/06-20049-009 500.00

STAPLE CHECK HERE

14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE: John L Leech **JOHN L. LEECH** 4/22/06 (941) 341-0740
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #