

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000000553

Entity Name: LESKO CORPORATION

FILED  
Feb 04, 2008  
Secretary of State

## Current Principal Place of Business:

5029 DALEWOOD STREET.  
PUNTA GORDA, FL 33982

## New Principal Place of Business:

## Current Mailing Address:

P O BOX 154  
FT. OGDEN, FL 34267

## New Mailing Address:

FEI Number: 54-0743281

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BROWN, JUDITH W  
5029 DALEWOOD STREET  
PUNTA GORDA, FL 33982 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: BROWN, ROBERT R SR.  
Address: P O BOX 154  
City-St-Zip: FORT OGDEN, FL 34267

Title: D ( ) Delete  
Name: BROWN, JUDITH W  
Address: P O BOX 154  
City-St-Zip: FORT OGDEN, FL 34267

Title: V ( ) Delete  
Name: SMITH, S. CLAVIS  
Address: 1835 B LOCKARD AVE.  
City-St-Zip: CHESAPEAKE, VA 23320

Title: P ( ) Delete  
Name: BROWN, ROBERT R JR  
Address: 5437 PAPAYA ST  
City-St-Zip: PUNTA GORDA, FL 33982

Title: ST ( ) Delete  
Name: COPELAND, JOSEPH G JR.  
Address: 204 MARCH DR.  
City-St-Zip: SUFFOLK, VA 23434

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JUDITH W BROWN

D

02/04/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date