

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F03000005545

1. Entity Name
THE LEATHER LADY, INC.



Principal Place of Business
11565-226 NORTH MAIN STREET
CEDAR BAY VILLAGE
JACKSONVILLE, FL 32218

Mailing Address
11565-226 NORTH MAIN STREET
CEDAR BAY VILLAGE
JACKSONVILLE, FL 32218

FILED
May 17, 2004 08:00 AM
Secretary of State



01092004 No Chg-P CR2E034 (10/03)

4. FEI Number
58-2658364

Applied For
Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

TRANHAM, PATRICIA A
11565-226 NORTH MAIN STREET
CEDAR BAY VILLAGE
JACKSONVILLE, FL 32218

DO NOT WRITE
IN THIS SPACE

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when retesting)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

U000000160725
05/17/04-80010-024 150.00

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PDST
TRANHAM, PATRICIA A
510 WHEELER STREET
ST. MARYS, GA 31558

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DO NOT WRITE
IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Patricia A. Tranham*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

904 757 4151