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02/07/2006 TUE 10:12 FAX 570 368 7521

LEEP INC.

FILED
Mar 21, 2006 8:00 am
Secretary of State

03-21-2006 90040 007 ***150.00

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # F05000003643			
1. Entity Name LEADING EDGE EARTH PRODUCTS, INC.			
Principal Place of Business P.O. BOX 365 MONTGOMERY, PA 17754		Mailing Address P.O. BOX 365 MONTGOMERY, PA 17754	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 93-1002429		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent STEVENS, JACK 1633 HIGH BRIDGE ROAD, BAY #8 QUINCY, FL 32351		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 _____ (NOTE: Registered Agent signature required when reappointing)			
FILE NOW!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	CEO RECORD, GRANT 666 BLUE LAKE BLVD. N., SUITE 139 TWIN FALLS ID 83301	☐ Delete	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD RECORD, GRANT 666 BLUE LAKE BLVD N., SUITE 139 TWIN FALLS ID 83301	☐ Delete	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	COO SCHRAGE, DENNIS 408 YORKSHIRE COURT GRAYSLAKE, IL 60030	☐ Delete	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	CD SCHRAGE, DENNIS 408 YORKSHIRE COURT GRAYSLAKE, IL 60030	☐ Delete	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	CFO KARR, GREG 315 ST. ANDREWS DRIVE ROSEVILLE, PA 85678	☐ Delete	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D THORNE, DAVE 261 SECHLER DRIVE MONTGOMERY, PA 17754	☐ Delete	
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Change ☐ Addition	
12. 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 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 original address with other like empowered.			
SIGNATURE: <u>Dennis Schrage</u> DENNIS SCHRAGE, CHAIRMAN FEB. 7, 2006			

50003820



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