

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F09000002038

**FILED**  
**Feb 15, 2011**  
**Secretary of State**

**Entity Name:** JAKE SWEENEY AUTO LEASING INC

**Current Principal Place of Business:**

8755 FIELDS ETEL RD  
CINCINNATI, OH 45249

**New Principal Place of Business:**

7901 VINE STREET  
CINCINNATI, OH 45216

**Current Mailing Address:**

8755 FIELDS ETEL RD  
CINCINNATI, OH 45249

**New Mailing Address:**

7901 VINE STREET  
CINCINNATI, OH 45216

**FEI Number:** 31-0675574

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ABSOLUTE PERFECTION LIMOUSINE SERVICE LLC  
8220 SW 4TH TERRACE  
GAINESVILLE, FL 32608 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:** PRES  
**Name:** LOPER, DAVID K  
**Address:** 515 OLIVER CT  
**City-St-Zip:** WYOMING, OH 45215

**Title:** VP  
**Name:** SWEENEY, MARY S  
**Address:** 4331 BAYSHORE BLVD NE  
**City-St-Zip:** ST PETERSBURG, FL 33703

**Title:** S  
**Name:** CASINELLI, DEBORAH S  
**Address:** 450 GLENDALE AVE  
**City-St-Zip:** CINCINNATI, OH 45246

**Title:** T  
**Name:** SCHNEIDER, PAMELA J  
**Address:** 330 ASHLEY LN  
**City-St-Zip:** WYOMING, OH 45215

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:** DAVID K LOPER

PRES

02/15/2011

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

\_\_\_\_\_  
Date