## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## **FILED** Apr 03, 2006 08:00 AM Secretary of State

DOCUMENT	`#F93000004292
----------	----------------

1. Entity Name

LEEWARD SOUND CORPORATION



Principal Place of Business

C/O SAMOUCE, MARRELL & GAL, P.A. 5405 PARK CENTRAL COURT NAPLES, FL 34109 US

Mailing Address

C/O SAMOUCE, MARRELL & GAL, P.A. 5405 PARK CENTRAL COURT NAPLES, FL 34109 US



## DO NOT WRITE IN THIS SPACE

SIGNATURE AND TYPED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR

03262006	No Chg-P	CR2	E034 (11/05)	
4. FEI Number			Applied For	
98-0132	2408		Not Applicable	
5. Certificate of	of Status Desired		\$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

SAMOUCE, MURRELL & GAL, P.A. 5405 PARK CENTRAL COURT **NAPLES, FL 34109** 

SIGNATURE: 3

## DO NOT WRITE IN THIS SPACE

}		ì						
<ol> <li>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 lamiliar with, and accept the obligations of registered agent.</li> </ol>								
SIGNATURE.	SIGNATURE—Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE							
FILE NOW!!! FEE IS \$150.00  After May 1, 2006 Fee will be \$550.00  9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.  Added to Fees								
19.	OFFICERS AND DIRE	CTORS						
THE NAME STREET ADDRESS CITY ST-ZIP	PS LUDWIG, GERTRAUD 350 5TH AVE. SOUTH, SUITE 200 NAPLES, FL 33942		·					
Title Name Street address City-St-Zip	D ADLER, EMMA 350 5TH AVE. SOUTH, SUITE 200 NAPLES, FL 33942	-			U00000487645 04/14/06-80003-009 150.00			
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE			
NAME STREET ADDRESS CITY-ST-ZIP				IN 7	THIS SPACE			
title Name Street Address Cit <b>y - St</b> - Zip								
TITLE WAME STREET ADDRESS CHY-ST-ZIP								
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 an address, with all other like empowered.								