2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 11, 2005 08:00 AM **DOCUMENT # F99000003713 Secretary of State** LESLIE TRAILER SALES AND RENTALS, INC. Principal Place of Business ____ Mailing Address 1340 JEFFERSON DR 1340 JEFFERSON DR LAKELAND, FL 33803-2357 US LAKELAND, FL 33803-2357 US 02042005 No Chg-P CB2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 38-2705134 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Ø Fee Required 6. Name and Address of Current Registered Agent LESLIE, DWIGHT DO NOT WRITE 1340 JEFFERSON DR LAKELAND, FL 33803-2357 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 reinstating) DATE 9. Election Campaign Financing **\$5.00** May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. 7/7/E DWIGHT EARL LESLIE 1340 JEFFERSON DRIVE STREET ADDRESS CITY-ST-7IP LAKELAND, FL 338032357 TITLE STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TIBLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-51-7IP TITLE

12. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Stalutes, 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.

NAME STREET ADDRESS CITY-ST-7IP

CESCIE PRES 2/4/05 (est. SIGNATURE: