FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

H37897

(6)

LEONARD COMMUNICATIONS, INC.

Principal Place of Business

Mailing Address

7523 ALOMA AVE. STE.109B WINTER PARK FL 32792 7523 ALOMA AVE. STE.1098



WINTER PARK FE 32/92	WINTER PARK FL 32790	2		
			3. Date Incorporated or Qualified 01/15/1985	3a. Date of Last Report 04/11/1995
2. Principal Place of Business 21 4004 WITTWOOD CT	<u> </u>	TTWOOD CT	4, FEI Number 59-2490708	Applied For Not Applicable
Suite Apt. #, etc.	Suite, Apt #, etc		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	City & State 28 OCLANDO 1	C1	6. Election Campaign Financing	\$5.00 May Be
Zip Country	28 UNCANDO	Country	Trust Fund Contribution 8. This corporation has liability for in	Added to Fees
24 3 2817 25 USA	1 1	o USA	Florida Statutes Yes	□No
9, Name and Address of Current I	Registered Agent	81] Name	10. Name and Address of New Re	egistered Agent
LEONARD, GENE				
7523 ALOMA AVE.		82 Street Addre	ss (P.O. Box Number is Not Acceptable 47) 04 W (TT W)	ood ct.
SUITE 107		83		
WINTER PARK FL		84 City	ORLANDO, FL -	FL 85 ZG Code
11. Pursuant to the provisions of Sections 607.0502 at	ri 607.1508, Florida Statutes, t	the above-named corpora	tion submits this statement for the pure	ase of changing its registered office
or registered agent, or both, in the State of Florida familiar with, and account the obligations of, Section	\$55 chunge was authorized t \$57,0505. Horida Statutes.	by the corporation's board	Lof directors. Thereby accept the appo	intment as registered agent. I am
SIGNATURE Signation injustice professional of registers again as	interdangu alder (N.21).		When tenstishing	4-17-96
12. OFFICERS AND I		13.	ADDITIONS/CHANGES TO OFFE	CERS AND DIRECTORS IN 12
TITLE PTS	DELETE	1 1 TIFLE		Change Addition
NAME LEONARD, GENE		1.2 NAME		
STREET ADDRESS 4004 WITWOOD CT. ORLANDO FL		1.3 STREET ADDRESS		
CITY - ST - ZIP OHLANDU FL	□ DELETE	1.4 CHY-S1-ZIP 2.1 Title		Change Addition
NAME		2.2 NAME		Onlings Rodullon
STREET ADDRESS		2.3 STREET ADDRESS		
City-St-ZiP		2 4 CITY - ST - ZIP		
TOTLE	DELETE	3 1 Tifle		Criange Addition
NAME		3.2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS		
CITY - ST - ZIP		3.4 CiTY - ST - ZiP		
TITLE	☐ DELETE	4 1 Tillé		Change C Addition
NAME		4 2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY - ST - ZIP	DECETE	4.4.0-1Y-S1-ZIP		Change Addition
NAME		5 1 Tille		Change Addition
STREET ADDRESS		5.2 NAME 5.3 SPREEL ADDRESS		
CHY-SI-ZIP		5.4 C:TY S1-ZIP		
TITLE	DELETE	6 1 TITLE		Change Addition
NAME	-	6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CHTY-ST-ZIP		6.4 Crty - St. ZIP		
14. For hereby certify that the information supplied with	In this filing is voluntarily furnished		r the exemption stated in Section 119.0	07(3)(k) Florida Statutes I further

certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: GENERAL AND TYPED OF BRIDGE NAME OF SIGNING OFFICE OF COORD

17-96 407-657-939