

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H59099

FILED  
Apr 24, 2007  
Secretary of State

Entity Name: LESLIE TRANSPORTATION CORPORATION

**Current Principal Place of Business:**

5001 LOUISIANA AVE.  
NASHVILLE, TN 37209

**New Principal Place of Business:**

**Current Mailing Address:**

5001 LOUISIANA AVE.  
NASHVILLE, TN 37209

**New Mailing Address:**

FEI Number: 35-1659691

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PAGE, MARTIN S.  
228 E. DUVAL ST.  
LAKE CITY, FL 32055 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: BRUCE, LESLIE A.,  
Address: 6516 MAPLEDOWNS DR.  
City-St-Zip: FT. WAYNE, IN

Title: P ( ) Delete  
Name: BRUCE, ROBERT E.,  
Address: 5001 LOUISIANA AVE.  
City-St-Zip: NASHVILLE, TN 37209

Title: VP ( ) Delete  
Name: HAGAN, KATHLEEN,  
Address: 6728 DARDEN PL.  
City-St-Zip: NASHVILLE, TN 37205

Title: D ( ) Delete  
Name: JANET HAGAN,  
Address: 6728 DARDEN PL.  
City-St-Zip: NASHVILLE, TN 37205

Title: D ( ) Delete  
Name: JASON BRUCE,  
Address: 5001 LOUISIANA AVE.  
City-St-Zip: NASHVILLE, TN 37209

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: KATHLEEN HAGAN

VP

04/24/2007

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

\_\_\_\_\_  
Date