

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H75738

Entity Name: CONLEA, INC.

FILED  
Jan 11, 2006  
Secretary of State

## Current Principal Place of Business:

8136 ATLANTIC BOULEVARD  
JACKSONVILLE, FL 32211

## New Principal Place of Business:

## Current Mailing Address:

8136 ATLANTIC BOULEVARD  
JACKSONVILLE, FL 32211

## New Mailing Address:

FEI Number: 59-2578149

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LEAKE, DARRELL  
306 OCEANFRONT  
NEPTUNE BEACH, FL 32233 US

## Name and Address of New Registered Agent:

LEAKE, DARRELL  
306 OCEANFRONT  
NEPTUNE BEACH, FL 32266 US

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:

01/11/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: LEAKE, DARRELL,  
Address: 306 OCEANFRONT  
City-St-Zip: NEPTUNE BEACH, FL

Title: VD ( ) Delete  
Name: CONE, JR., EDDIE D  
Address: 306 OCEANFRONT  
City-St-Zip: NEPTUNE BEACH, FL 32266

Title: D ( ) Delete  
Name: RADICHES, JOHN,  
Address: 10555 SERENA DR  
City-St-Zip: JACKSONVILLE, FL

Title: S ( ) Delete  
Name: CONE, VALERIE J  
Address: 304 OCEANFRONT  
City-St-Zip: NEPTUNE BEACH, FL 32266

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: LEAKE, DARRELL,  
Address: 306 OCEANFRONT  
City-St-Zip: NEPTUNE BEACH, FL 32266

Title: VD (X) Change ( ) Addition  
Name: CONE, JR., EDDIE D  
Address: 4366 RICHMOND PARK DRIVE E  
City-St-Zip: JACKSONVILLE, FL 32224

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

Title: S (X) Change ( ) Addition  
Name: CONE, VALERIE J  
Address: 4366 RICHMOND PARK DRIVE E  
City-St-Zip: JACKSONVILLE, FL 32224

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: DARRELL LEAKE

P

01/11/2006

Electronic Signature of Signing Officer or Director

Date