

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 16, 2001 8:00 am**  
**Secretary of State**

04-16-2001 90060 018 \*\*\*150.00

0078259

**DOCUMENT # J11006**

1. Entity Name

**LEANING TOWER CENTER, INC.**

Principal Place of Business

% VINCENZO PETRALIA  
1696 SHERIANA COURT NW  
PALM BAY FL 32907

Mailing Address

% VINCENZO PETRALIA  
1696 SHERIANA COURT NW  
PALM BAY FL 32907

2. Principal Place of Business

821 Hollahan Rd SE

Suite, Apt. #, etc.

3. Mailing Address

821 Hollahan Rd SE

Suite, Apt. #, etc.

City & State

Palm Bay, FL

City & State

Palm Bay, FL

4. FEI Number

59-2709175

Applied For

Not Applicable

Zip

32909

Country

U.S.A.

Zip

32909

Country

U.S.A.

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

PETRALIA, VINCENZO  
1696 SHERIANA COURT NW  
PALM BAY FL 32907

7. Name and Address of New Registered Agent

Name Patricia Petralia

Street Address (P.O. Box Number is Not Acceptable)  
821 Hollahan Rd SE

City Palm Bay

FL

Zip Code 32909

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.

SIGNATURE *Patricia Petralia*

Patricia Petralia  
Vice President

4/6/01

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.

(See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**

**After MAY 1, 2001 Fee will be \$550.00**

**Make Check Payable to Department of State**

10. Election Campaign Financing

Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE PD  
NAME PETRALIA, VINCENZO ☐ Delete  
STREET ADDRESS 1696 SHERIANA COURT NW  
CITY-ST-ZIP PALM BAY FL 32907

TITLE VD  
NAME PETRALIA, PATRICIA ☐ Delete  
STREET ADDRESS 1696 SHERIANA COURT NW  
CITY-ST-ZIP PALM BAY FL 32907

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 821 Hollahan Road SE  
CITY-ST-ZIP Palm Bay, FL 32909

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 821 Hollahan Road SE  
CITY-ST-ZIP Palm Bay, FL 32909

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Patricia Petralia*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Patricia Petralia  
Vice President

4/6/01

Date

Daytime Phone #

321-733 6442

CR2E034 (10/00)