

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000119134

FILED  
Feb 12, 2008  
Secretary of State

Entity Name: LEEDSGRAND LLC

**Current Principal Place of Business:**

6645 US HWY1  
GRANT, FL 32949 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 780897  
SEBASTIAN, FL 32978 US

**New Mailing Address:**

FEI Number: 11-3836556

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

LEEDS, DAVID L  
6645 US HWY1  
GRANT, FL 32949 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

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: LEEDS, MARY E  
Address: PO BOX 780897  
City-St-Zip: SEBASTIAN, FL 32978 US

Title: MGR ( ) Delete  
Name: LEEDS, DAVID L  
Address: PO BOX 780897  
City-St-Zip: SEBASTIAN, FL 32978 US

Title: MGRM ( ) Delete  
Name: LEEDS, SCOTT D  
Address: 6006 RIDDLE ROAD  
City-St-Zip: LOCKPORT, NY 14094 US

Title: MGRM ( ) Delete  
Name: LEEDS, SEAN D  
Address: PO BOX 652  
City-St-Zip: EAST AMHERST, NY 14051 US

**ADDITIONS/CHANGES:**

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 exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: DAVID L LEEDS

MGR

02/12/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date