**FILE NOW: FILING FEE AFTER MAY 1 IS $550.00**

FILED
May 14 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L33043 (5)

1. Corporation Name
LESLIE DAWN, INC.

| Principal Place of Business | Mailing Address |
|---|---|
| 109 OVERLEA WAY<br>46 N. WASHINGTON BLVD., #1<br>VENICE FL 34292<br>US | %JOHN PATTERSON<br>46 N. WASHINGTON BLVD., #1<br>SARASOTA FL 34236-5977<br>US |

2. Principal Place of Business
21 109 OVERLEA WAY
Suite, Apt. #, etc.
22
City & State
23 VENICE FL
Zip 24 34292 Country 25

2a. Mailing Address
26 109 Overlea Way
Suite, Apt. #, etc.
27
City & State
28 Venice FL
Zip 29 34292 Country 30 USA

3. Date Incorporated or Qualified: 11/22/1989
3a. Date of Last Report: 05/01/1996
4. FEI Number: 65-0158559 — Applied For / Not Applicable
5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent
PATTERSON, JOHN
46 N. WASHINGTON BLVD.
SUITE 1
SARASOTA FL 34236

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE ____________________
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

| 12. OFFICERS AND DIRECTORS | | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|---|---|---|---|---|
| TITLE | DPS | ☐ DELETE | 1.1 TITLE | ☒ Change ☐ Addition |
| NAME | MCGIFFEN, JOHN W | | 1.2 NAME | |
| STREET ADDRESS | 7790 CLUB LANE | | 1.3 STREET ADDRESS | 8916 WHITEMARSH AVE. |
| CITY-ST-ZIP | SARASOTA FL | | 1.4 CITY-ST-ZIP | SARASOTA FL 34238 |
| TITLE | AST | ☐ DELETE | 2.1 TITLE | ☒ Change ☐ Addition |
| NAME | MCGIFFEN, CAMEN M | | 2.2 NAME | McGiffen, Carmen |
| STREET ADDRESS | 7790 CLUB LANE | | 2.3 STREET ADDRESS | 8916 WHITEMARSH AVE. |
| CITY-ST-ZIP | SARASOTA FL | | 2.4 CITY-ST-ZIP | SARASOTA FL 34238 |
| TITLE | VPAS | ☐ DELETE | 3.1 TITLE | ☐ Change ☐ Addition |
| NAME | EDSEL, EDWARD E | | 3.2 NAME | |
| STREET ADDRESS | 8987 HUNTINGTON POINT DRIVE | | 3.3 STREET ADDRESS | |
| CITY-ST-ZIP | SARASOTA FL | | 3.4 CITY-ST-ZIP | |
| TITLE | | ☐ DELETE | 4.1 TITLE | VP, AS ☐ Change ☒ Addition |
| NAME | | | 4.2 NAME | EGGLESTON, SUSAN E |
| STREET ADDRESS | | | 4.3 STREET ADDRESS | 109 Overlea Way |
| CITY-ST-ZIP | | | 4.4 CITY-ST-ZIP | Venice, FL 34292 |
| TITLE | | ☐ DELETE | 5.1 TITLE | ☐ Change ☐ Addition |
| NAME | | | 5.2 NAME | |
| STREET ADDRESS | | | 5.3 STREET ADDRESS | |
| CITY-ST-ZIP | | | 5.4 CITY-ST-ZIP | |
| TITLE | | ☐ DELETE | 6.1 TITLE | ☐ Change ☐ Addition |
| NAME | | | 6.2 NAME | |
| STREET ADDRESS | | | 6.3 STREET ADDRESS | |
| CITY-ST-ZIP | | | 6.4 CITY-ST-ZIP | |

CR2E034 (9/96)

14. I do 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 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 (941) 497-4786