## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N04000008773

CHASE, LEACH

2278 MOTT AVE.

FAR ROCKAWAY, NY 11691

Name:

Address:

City-St-Zip:

FILED Apr 30, 2005 Secretary of State

Entity Nar	ne: LEE ROE	BERTS HOUSE, INC.			
Current P	incipal Place	of Business:	New Principal Plac	New Principal Place of Business:	
	3RD ST., AP1 OD, FL 3302				
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
	3RD ST., AP1 OD, FL 3302				
FEI Number:	20-1622070	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of C	Current Registered Agent:	Name and Address	Name and Address of New Registered Agent:	
	, CECILY 3RD ST., APT OD, FL 3302				
The above in the State		submits this statement for the p	urpose of changing its registe	red office or registered agent, or both,	
SIGNATUR	RE:				
Electronic Signature of Registered Agent			nt	Date	
OFFICERS	AND DIREC	TORS:	ADDITIONS/CHAN	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D ( ) ROBERTS, CE 7481 NW 33RE HOLLYWOOD,	ST., APT. 23	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D ( ) BLAKE-NUBIN, 404 A. OAK ST THOMASTON,		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D ( ) DANIEL, DEME 2720 NW 58TH LAUDERHILL, I	TERR.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	D ()	) Delete	Title:	( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: LILLIAN BLAKE-NUBIN MRS. 04/30/2005