## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N06000006261

FILED Apr 30, 2007 Secretary of State

Entity Nam	ne: LESPWA	WORLDWIDE, INC.						
Current Principal Place of Business:				New Principal Place of Business:				
1441 PENMAN ROAD NEPTUNE BEACH, FL 32266				1616 MERROWAY LANE PONTE VEDRA, FL 32081				
Current Mailing Address:				New Mailing Address:				
1441 PENMAN ROAD NEPTUNE BEACH, FL 32266				P.O. BOX 3336 PONTE VEDRA, FL 32004				
FEI Number:	20-5019981	FEI Number Applied For ( )	FEI Nun	nber Not Appli	cable ( )	Certificate of S	Status Desired ( )	
-					Name and Address of New Registered Agent:			
2 SOUTH F	ON, CHRIS A ROSCOE BLVE DRA BEACH,							
The above in the State		ubmits this statement for the	purpose o	f changing it	s registere	d office or registe	ered agent, or both,	
SIGNATUR	RE:							
Electronic Signature of Registered Agent				Date				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:				
Title: Name: Address: City-St-Zip:	CHERRY, JAY 1441 PENMAN C	Delete CENTER BEACH, FL 32082		Title: Name: Address: City-St-Zip:		() Change () Add	ition	
Title: Name: Address: City-St-Zip:	VASSALLO, TRA 40 MILLIE DRIVI			Title: Name: Address: City-St-Zip:	D BERQUIST, 288 W. SILV PONTE VED		lition	
Title: Name: Address: City-St-Zip:	D () KIMBALL, JACO 1616 MERROWA ST AUGUSTINE,	AY LANE		Title: Name: Address: City-St-Zip:		(X) Change ( ) Add ACOB OWAY LANE DRA, FL 32081	lition	
Title: Name: Address: City-St-Zip:	( )	Delete		Title: Name: Address: City-St-Zip:	467 UPPER	() Change (X) Add IOWARD M III 8TH AVE. SOUTH ILLE BEACH, FL 32:		

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 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.

SIGNATURE: JACOB KIMBALL 04/30/2007 D