

2004 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # N99000005620

1. Entity Name
FLORIDA L.E.G.A.L., INC.



FILED

04 DEC -2 AM 11: 52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
P.O. BOX 0068
KEY WEST, FL 33041-0068

Mailing Address
P.O. BOX 0068
KEY WEST, FL 33041-0068



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

11182004 Chg-NP CR2E037 (10/03)

City & State

City & State

4. FEI Number
65-0951104

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ECKSTEIN, ALAN-ESQ.
3010 FLAGLER AVE
KEY WEST, FL 33040

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

Amended AR is \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE P ☐ Delete
NAME BARRON, MICHAEL
STREET ADDRESS P.90. BOX 2252
CITY-ST-ZIP KEY WEST, FL 33040

TITLE VP ☐ Delete
NAME CARROLL, HUNTER
STREET ADDRESS 134 GOLF CLUB LANE
CITY-ST-ZIP VENICE, FL 34293

TITLE ST ☐ Delete
NAME SLEBODNICK, CHARLES
STREET ADDRESS 5000 S ROOSEVELT BLVD., #113N
CITY-ST-ZIP KEY WEST, FL 33040

TITLE D ☐ Delete
NAME TORRENCE, STEVEN
STREET ADDRESS 3930 S ROOSEVELT BLVD., 3305 W
CITY-ST-ZIP KEY WEST, FL 33040

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME 3930 S. ROOSEVELT BLVD.
STREET ADDRESS #208 E
CITY-ST-ZIP KEY WEST, FL. 33040

TITLE ☐ Change ☐ Addition
NAME 900043127909
STREET ADDRESS 12/02/04--01036--003 **\$61.25
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME 3930
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME 43 FIRST STREET
STREET ADDRESS KEY WEST, FL. 33040
CITY-ST-ZIP

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

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

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CHARLES SLEBODNICK

Date

11/30/04

Daytime Phone

305-292-2783