

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000021205

Entity Name: C. LEE, INC

FILED
Feb 22, 2005
Secretary of State

Current Principal Place of Business:

5224 W. STATE ROAD 46
PMB 231
SANFORD, FL 32771

New Principal Place of Business:

1450 KASTNER PLACE
SUITE 100
SANFORD, FL 32771

Current Mailing Address:

5224 W. STATE ROAD 46
PMB 231
SANFORD, FL 32771

New Mailing Address:

FEI Number: 59-3629739 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEE, CHAD D
8260 VIA BELLA
SANFORD, FL 32771 US

Name and Address of New Registered Agent:

LEE, CHAD D
604 TUSCANY COURT
SANFORD, FL 32771 US

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: _____

02/22/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LEE, CHAD D
Address: 8260 VIA BELLA
City-St-Zip: SANFORD, FL 32771

Title: V () Delete
Name: LEE, JAY
Address: 4995 FAWN RIDGE PL
City-St-Zip: LAKE FOREST, FL 32771

Title: S (X) Delete
Name: BRASHEARS, RICHARD
Address: 249 N 2ND STREET
City-St-Zip: LAKE MARY, FL 32746

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LEE, CHAD D
Address: 604 TUSCANY COURT
City-St-Zip: SANFORD, FL 32771

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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHAD D. LEE

P

02/22/2005

Electronic Signature of Signing Officer or Director

Date