

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000026165

Entity Name: LEELA SALES SERVICE, INC.

FILED
Mar 13, 2009
Secretary of State

Current Principal Place of Business:

4510 N. KEY DR., #204
N. FT. MYERS, FL 33903

New Principal Place of Business:

Current Mailing Address:

4510 N. KEY DR., #204
N. FT. MYERS, FL 33903

New Mailing Address:

FEI Number: 65-0990952

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EARL B. WILSON
4510 NORTH KEY DR.
#204
NORTH FORT MYERS,, FL 33903 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PDC () Delete
Name: WILSON, EARL B
Address: 4510 NO. KEY DRIVE #204
City-St-Zip: FORT MYERS, FL 33903

Title: VTSD () Delete
Name: WILSON, SILVIA P
Address: 4510 N.KEY DR. #204
City-St-Zip: FORT MYERS, FL 33903

Title: D () Delete
Name: WELCH, BILL
Address: 4909 SW 18TH STREET
City-St-Zip: CAPE CORAL, FL 33914

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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

SIGNATURE: EARL B WILSON

VTSD

03/13/2009

Electronic Signature of Signing Officer or Director

Date