

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000060214

Entity Name: LEE WESLEY GROUP, INC.

FILED
Apr 28, 2009
Secretary of State

Current Principal Place of Business:

924 N MAGNOLIA AVE
#303
ORLANDO, FL 32836

New Principal Place of Business:

Current Mailing Address:

924 N MAGNOLIA AVE
#303
ORLANDO, FL 32836

New Mailing Address:

FEI Number: 59-3662003

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEE, ARTHUR J
924 N. MAGNOLIA AVE., STE.303
ORLANDO, FL 32803 US

Name and Address of New Registered Agent:

ZIMMERMAN, KISER & SUTCLIFFE, PA
315 E. ROBINSON ST
SUITE 600
ORLANDO, FL 32801 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: STEVE HATCHER

04/28/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LEE, ARTHUR J
Address: 924 N MAGNOLIA AVE
City-St-Zip: ORLANDO, FL 32819

Title: VPD () Delete
Name: LEE, DELORES W
Address: 9234 SOUTHERN BREEZE DR
City-St-Zip: ORLANDO, FL 32836

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: ARTHUR J. LEE

PD

04/28/2009

Electronic Signature of Signing Officer or Director

Date