2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 21, 2006 08:00 AM Secretary of State

1. Entity Nam	MENT # P000000630 LEANERS, INC.			Secret	ary of St	ate	
Principal Plac 1779 E. BRO OVIEDO, FL	DADWAY ST	Mailing Address 1779 E. BROADWAY ST OVIEDO, FL 32765 US	,	4 1Mmassum III (55 d	F T IN \$\$40 62 71 63 72 48 7	er sanda berba densa bilin abe	(8) (80 (40) (1) (80)
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DO NOT WRITE IN THIS SPACE			CE	04142006 No Chg-P			
				5. Certificate of	of Status Desired	\$8.75 Fee Req	
	5. Name and Address of Current R JA STOVER RESERVE BOULEVAR MERE, FL 34786				NOT W HIS SP		
	named entity submits this statement for itions of registered agent.	the purpose of changing its registe	red office or registe	ered agent, or both	, in the State of Flo	rida. I am familiar w	ith, and accept
SIGNATURE	Signature, typed or printed name of registered agent an	d the it applicable. (NOTE. Register	ed Agent signature rjeguira	d when reinstaling)	_ :	DATE	
FIL After M	E NOWIII FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	S. Election Campaign Fins Trust Fund Contribution	sincing \$5	.00 May Be ded to Fees			
70. TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD OFFICERS AND D LEE, MEE JA 182 VALLEY STREAM GENOVA, FL	IRECTORS	:			ant or or or	
TITLE NAME STREET ADDRESS CITY-ST-TIP					05/03/0	00523325 6-80069-00)2 150.00
NAME STRUCT ADDRESS CITY-ST-ZIP				DO	NOT W	RITE	
ntile Name Street address City-St-21P				IN T	'HIS SF	PACE	
name Street Address City-St-Zip				-	-		٠.
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
Indicated of the cor:	certily that the information supplied with the on this report or supplemental report is poration or the receiver or trustee empower or or an attachment with an address, with the contract of the contract of the receiver or or an attachment with an address, with the contract of the contr	rue and accurate and that my signs rered to execute this report as requ	temptions contained sture shall have the alred by Chapter 60	d in Chapter 119, same legal effect 7, Florida Statutes	Florida Statutes. I as if made under o ; and that my name	further certily that the ath; that I am an office appears in Block 1	e information per or director 0 or Block 11 if