


# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Aug 08, 2003 8:00 am**  
**Secretary of State**

08-08-2003 90096 006 \*\*\*158.75

0121323 AT

<b>DOCUMENT #</b> P01000023501	
1. Entity Name <b>TECFRON, INC.</b>	

Principal Place of Business <b>1 WESTGRILL PLACE PALM COAST FL 32164</b>	Mailing Address <b>1 WESTGRILL PLACE PALM COAST FL 32164</b>
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2. Principal Place of Business	3. Mailing Address
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Suite, Apt. #, etc.	Suite, Apt. #, etc.
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City & State	City & State
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Zip	Country	Zip	Country
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4. FEI Number <b>59-3688819</b>	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>
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<b>6. Name and Address of Current Registered Agent</b>
<b>LESHER, HENRY T 1 WESTGRILL PLACE PALM COAST FL 32164</b>

<b>7. Name and Address of New Registered Agent</b>
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 <i>Henry T. Leshner, Sr. President</i>	DATE

**FILE NOW!!! FEE IS \$550.00**  
**After September 10, 2003 Fee will be \$750.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
<b>D LESHER, HENRY T JR 1 WESTGRILL PLACE PALM COAST FL 32164</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
<b>VP SCHMIDT, CATHERINE L 198 BARTLEY ROAD LONG VALLEY NJ 07853</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
<b>S LESHER, FREDERICK C 872 MASSACHUSETTS AVE #1007 CAMBRIDGE MA 02139</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
<b>T LESHER, AARON D 241 SEAMIST CT. PONTE VEDRA BEACH FL 32082</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
<b>P LESHER, HENRY T JR 628 SONOMA STREET SAN MARCOS CA 92078</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>President Henry T. Leshner, Sr. 1 Westgrill Place Palm Coast, FL 32164</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 607, 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: <i>Henry T. Leshner, Sr.</i>	DATE: <i>August 5, 2003</i>	DAYTIME PHONE: <i>(386) 446-6069</i>
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CR2E034 (4/03)

attachment

80137245

#P010000023501

HENRY T. LESHER • 1 WESTGRILL PLACE • PALM COAST, FL 32164 • (386) 446-6069

August 5, 2003

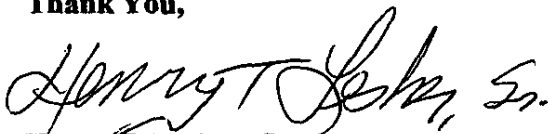
Florida Department of State  
Division of Corporations  
Secretary of State  
Glenda E. Hood  
P.O. Box 6327  
Tallahassee, Florida 32314

Dear Ms. Hood,

Enclosed is a Uniform Business Report for 2003 and my check for \$150.00. I suffered from congestive heart failure while staying with my son in California and upon my return to Palm Coast was hospitalized for five days with pneumonia and acute gastroenteritis.

The forwarding of my mail to California and back and my hospitalization here has caused me to be late in filing this report. I hope you will consider these extenuating circumstances and forgive any penalty for late filing.

Thank You,



Henry T. Lesh, Sr.  
President, TECFRON, Inc.