

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 03, 2003 8:00 am
Secretary of State

02-03-2003 90078 032 ***150.00

DOCUMENT # P01000036860



1. Entity Name
LESLIE C. MAGRE, P.A.

Principal Place of Business

~~5102 CORONADO PKWY~~

~~#4~~

~~CAPE CORAL FL 33904~~

Mailing Address

~~5102 CORONADO PKWY~~

~~#4~~

~~CAPE CORAL FL 33904~~

2. Principal Place of Business

14801 Park Lake Drive

Suite, Apt. #, etc.

106

City & State

FT. MYERS, FL

Zip

33919

Country

USA

3. Mailing Address

14801 Park Lake Drive

Suite, Apt. #, etc.

106

City & State

FT. MYERS, FL

Zip

33919

Country

USA

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **65-1094087**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MAGRE, LESLIE C

~~5102 CORONADO PKWY~~

~~CAPE CORAL FL 33904~~

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

14801 PARK LAKE DRIVE #106

City

Font MYERS

FL

Zip Code

33919

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

Leslie C. Magre

1/28/03

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete

NAME **MAGRE, LESLIE C**

STREET ADDRESS ~~5102 CORONADO PKWY #4~~

CITY-ST-ZIP ~~CAPE CORAL FL 33904~~

TITLE ☐ Delete

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ Delete

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ Delete

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ Delete

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ Delete

NAME

STREET ADDRESS

CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition

NAME

STREET ADDRESS

CITY-ST-ZIP

14801 PARK LAKE DRIVE #106

Font MYERS, FL 33919

TITLE ☐ Change ☐ Addition

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME

STREET ADDRESS

CITY-ST-ZIP

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NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME

STREET ADDRESS

CITY-ST-ZIP

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:

Leslie C. Magre

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/28/03

Date

239-823-9871

Daytime Phone #

CR2E034 (10/02)