2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000041670

Current Principal Place of Rusiness:

FORT MYERS, FL 33908

Entity Name: LEIENDECKER & WILENIUS, INC.

FILED Feb 25, 2008 Secretary of State

Ourient i inicipal i lace of business.	New Fillicipal Flace of Dusiliess.
2735 SANTA BARBARA BLVD. SUITE 201 CAPE CORAL, FL 33914	
Current Mailing Address:	New Mailing Address:
8843 TROPICAL CT.	15930 KNIGHTSBRIDGE CT.

FEI Number: 01-0737036 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

WRIGHT, CHRISTINE F ESQ. 2735 SANTA BARBARA BLVD SUITE 201 SUITE C CAPE CORAL, FL 33914 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: Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Now Principal Place of Rusiness:

FORT MYERS, FL 33908

(X) Change () Addition Title: () Delete Title: LEIENDECKER, GUIDO LEIENDECKER, GUIDO Name: Name: 8843 TROPICAL CT. 15930 KNIGHTSBRIDGE CT. Address: Address: City-St-Zip: FORT MYERS, FL 33908 City-St-Zip: FORT MYERS, FL 33908 Title: Title: () Delete () Change () Addition WILENIUS, YVONNE Name: Name: 215 S.W. 45TH TERRACE Address: Address:

 City-St-Zip:
 CAPE CORAL, FL 33914
 City-St-Zip:

 Title:
 O () Delete
 Title:
 O (X) Change () Addition

 Name:
 LEIENDECKER, RUTH
 Name:
 LEIENDECKER, RUTH

 Address:
 8843 TROPICAL CT.
 Address:
 15930 KNIGHTBRIDGE CT.

 City-St-Zip:
 FORT MYERS, FL 33908
 City-St-Zip:
 FORT MYERS, FL 33908

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: GUIDO LEIENDECKER D 02/25/2008