2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000071780

LEDUC, TONYA M

3650 WOODVILLE HIGHWAY

TALLAHASSEE, FL 32433

Name:

Address:

City-St-Zip:

FILED Apr 30, 2007 Secretary of State

Entity Name: LEDUC ENTERPRISES, INC.					
Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
	DVILLE HIGH SSEE, FL 323				
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
	DVILLE HIGH SSEE, FL 323				
FEI Number:	27-0019171	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
LEDUC, THOMAS 3650 WOODVILLE HIGHWAY TALLAHASSEE, FL 32305 US			LEDUC, THOMAS J 3650 WOODVILLE H TALLAHASSEE, FL	LEDUC, THOMAS J 3650 WOODVILLE HIGHWAY TALLAHASSEE, FL 32305 US	
The above in the State		submits this statement for the p	ourpose of changing its register	red office or registered agent, or both,	
SIGNATUR	RE: THOMAS	JLEDUC		04/30/2007	
	Electror	ic Signature of Registered Age	ent	Date	
Election Can	npaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	VTD () LEDUC, THOM 3650 WOODVII TALLAHASSEE	LLE HIGHWAY	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VD () HURST, DONAI 3650 WOODVII TALLAHASSEE	LLE HIGHWAY	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	PSD () HURST, BELINI 3650 WOODVII TALLAHASSEE	LLE HIGHWAY	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	VD ()	Delete	Title:	() Change () Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: BELINDA G HURST PSD 04/30/2007