## 2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

## Jan 29, 2007 08:00 AM **Secretary of State** DOCUMENT # P02000078709 1. Entity Name LEISA LUDLAM PROPERTIES, INC. Principal Place of Business Mailing Address 9051 PASADENA STREET 9051 PASADENA STREET PENSACOLA, FL 32534 PENSACOLA, FL 32534 01172007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 83-0345340 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent LUDLAM, LEISA D DO NOT WRITE 9051 PASADENA STREET PENSACOLA, FL 32534 IN THIS SPACE 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. Signature, typed or printed name of registered agent and ritle if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 U00000608224 Trust Fund Contribution. Added to Fees After May 1, 2007 Fee will be \$550.00 10. OFFICERS AND DIRECTORS TITLE LUDLAM, LEISA D NAME STREET ADDRESS 9051 PASADENA ST. PENSACOLA, FL 32534 CITY-ST-ZIP ME MANE STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

**FILED** 

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under ceth, 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: Sie S. Sadlan LEISA D. Ludlar Miresident & 1/21/07 850-48	4-0926