

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000083066

**FILED**  
**Mar 04, 2010**  
**Secretary of State**

**Entity Name:** EUGENE LEFLOCH ATTORNEY, P.A.

**Current Principal Place of Business:**

2202 N. WESTSHORE BLVD  
SUITE 200  
TAMPA, FL 33607

**New Principal Place of Business:**

**Current Mailing Address:**

3906 W. EDENROC CIRCLE  
TAMPA, FL 336347420 US

**New Mailing Address:**

**FEI Number:** 04-3708475

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LEFLOCH, EUGENE  
3906 W. EDENROC CIRCLE  
TAMPA, FL 336347420 US

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

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:**

**Title:** PRES  
**Name:** LEFLOCH, EUGENE M ESQ  
**Address:** 3906 W. EDENROC CIRCLE  
**City-St-Zip:** TAMPA, FL 336347420 US

I hereby 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 all other like empowered.

**SIGNATURE:** EUGENE M LEFLOCH

PRES

03/04/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date