

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000092049

Entity Name: MICHAEL L. LEETZOW, P.A.

FILED
Mar 31, 2006
Secretary of State

Current Principal Place of Business:

5213 SHORELINE CIR
SANFORD, FL 32771

New Principal Place of Business:

5213 SHORELINE CIR
SANFORD, FL 327715408

Current Mailing Address:

5213 SHORELINE CIR
SANFORD, FL 32771

New Mailing Address:

5213 SHORELINE CIR
SANFORD, FL 327715408

FEI Number: 22-3867026

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEETZOW, MICHAEL L ESQ.
5213 SHORELINE CIR
SANFORD, FL 32771 US

Name and Address of New Registered Agent:

LEETZOW, MICHAEL L ESQ.
5213 SHORELINE CIR
SANFORD, FL 327715408 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: /MICHAEL L. LEETZOW/

03/31/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: MR. () Delete
Name: LEETZOW, MICHAEL L
Address: SHORELINE CIR
City-St-Zip: SANFORD, FL 32771

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MR. (X) Change () Addition
Name: LEETZOW, MICHAEL L
Address: SHORELINE CIR
City-St-Zip: SANFORD, FL 327715408

I hereby certify that the information supplied with this filing does not qualify for the 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: /MICHAEL L. LEETZOW/

PRES

03/31/2006

Electronic Signature of Signing Officer or Director

Date