

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000131380

Entity Name: T-SQUARE ENTERPRISES, INC.

FILED  
Jan 25, 2008  
Secretary of State

## Current Principal Place of Business:

9310 36 AVE EAST  
PALMETTO, FL 34221

## New Principal Place of Business:

1609 LIGHTFOOT RD.  
WIMAUMA, FL 33598

## Current Mailing Address:

9310 36 AVE EAST  
PALMETTO, FL 34221

## New Mailing Address:

1609 LIGHTFOOT RD.  
WIMAUMA, FL 33598

FEI Number: 75-3091751

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LEONARD, DAVID N  
4920 JIM DAVIS ROAD  
PARRISH, FL 34219 US

## Name and Address of New Registered Agent:

LEONARD, JON D  
1609 LIGHTFOOT RD.  
WIMAUMA, FL 33598 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: JON D. LEONARD

01/25/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: LEONARD, DAVID N  
Address: 4920 JIM DAVIS ROAD  
City-St-Zip: PARRISH, FL 34219

Title: D ( ) Delete  
Name: LEONARD, JON D  
Address: 9310 36 AVE EAST  
City-St-Zip: PALMETTO, FL 34221

Title: D ( ) Delete  
Name: LEONARD, ANGELA C  
Address: 9310 36 AVE E  
City-St-Zip: PALMETTO, FL 34221

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: LEONARD, JON D  
Address: 1609 LIGHTFOOT RD.  
City-St-Zip: WIMAUMA, FL 33598

Title: D (X) Change ( ) Addition  
Name: LEONARD, ANGELA C  
Address: 1609 LIGHTFOOT RD.  
City-St-Zip: WIMAUMA, FL 33598

Title: D (X) Change ( ) Addition  
Name: LEONARD, DAVID N  
Address: 4920 JIM DAVIS RD.  
City-St-Zip: PARRISH, FL 34219

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: ANGELA C. LEONARD

D

01/25/2008

Electronic Signature of Signing Officer or Director

Date