# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Apr 17, 2006**
**Secretary of State**

DOCUMENT# P03000068940

**Entity Name:** PAUL LEIGHTON'S PET SERVICE, INC.

**Current Principal Place of Business:**

671 VALLANCE WAY NE
ST. PETERSBURG, FL 33716

**New Principal Place of Business:**

1870 NEBRASKA AVE. NE
ST. PETERSBURG, FL 33703

**Current Mailing Address:**

671 VALLANCE WAY NE
ST. PETERSBURG, FL 33716

**New Mailing Address:**

1870 NEBRASKA AVE. NE
ST. PETERSBURG, FL 33703

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

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

LEIGHTON, PAUL
671 VALLANCE WAY NE
ST. PETERSBURG, FL 33716 US

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

LEIGHTON, PAUL
1870 NEBRASKA AVE. NE
ST. PETERSBURG, FL 33703 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: 04/17/2006
Electronic Signature of Registered Agent — Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete
Name: LEIGHTON, PAUL
Address: 671 VALLANCE WAY NE
City-St-Zip: ST. PETERSBURG, FL 33716

Title: D ( ) Delete
Name: SARLO, LUCIANNE
Address: 671 VALLANCE WAY NE
City-St-Zip: ST. PETERSBURG, FL 33716

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition
Name: LEIGHTON, PAUL
Address: 1870 NEBRASKA AVE. NE
City-St-Zip: ST. PETERSBURG, FL 33703

Title: D (X) Change ( ) Addition
Name: SARLO, LUCIANNE
Address: 1870 NEBRASKA AVE. NE
City-St-Zip: ST. PETERSBURG, FL 33703

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: LUCIANNE SARLO D 04/17/2006
Electronic Signature of Signing Officer or Director — Date