

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000074398

Entity Name: LESLIE ENTERPRISES, INC

FILED  
Apr 27, 2006  
Secretary of State

## Current Principal Place of Business:

188 GULFSTREAM ST  
MARCO ISLAND, FL 34145

## New Principal Place of Business:

1540 BISCAYNE WAY  
MARCO ISLAND, FL 34145

## Current Mailing Address:

PO BOX 1838  
MARCO ISLAND, FL 34146

## New Mailing Address:

FEI Number: 47-0938686

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MCDavid, LESLIEANNE E  
188 GULFSTREAM ST  
MARCO ISLAND, FL 34145 US

## Name and Address of New Registered Agent:

MCDavid, LESLIEANNE E  
1540 BISCAYNE WAY  
MARCO ISLAND, FL 34145 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:

04/27/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete  
Name: MCDavid, LESLIEANNE E  
Address: P.O. BOX 1838  
City-St-Zip: MARCO ISLAND, FL 34146

Title: VICE ( ) Delete  
Name: MCDavid, LESLIEANNE E  
Address: P.O. BOX 1838  
City-St-Zip: MARCO ISLAND, FL 34146

Title: SEC ( ) Delete  
Name: MCDavid, LESLIEANNE E  
Address: P.O. BOX 1838  
City-St-Zip: MARCO ISLAND, FL 34146

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: LESLIEANNE E. MCDavid

PRES

04/27/2006

Electronic Signature of Signing Officer or Director

Date