

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 14, 2004 8:00 am
Secretary of State

04-26-2004 91004 040 ***150.00

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04212004 Chg-P CR2E034 (10/03)

DOCUMENT # P03000119791			
1. Entity Name LESLI A. BURKHEAD, P.A.			
Principal Place of Business 7703 SW 102 PLACE MIAMI, FL 33173		Mailing Address COLDWELL BANKER/BISHOP REALTY C/O LESLI A BURKHEAD, 7 NW 21 STREET HOMESTEAD, FL 33030	
2. Principal Place of Business 7 NW 21 ST		3. Mailing Address SAME	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State HOMESTEAD, FL		City & State	
Zip 33030	Country MIAMI GAOE	Zip	Country
4. FEE Number 56-241-5220		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BURKHEAD, LESLI A 15250 SW 271 STREET HOMESTEAD, FL 33032		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE: <i>Lesli A. Burkhead</i> DATE: 5-10-04 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)			
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD BURKHEAD, LESLI A 7703 SW 102 PLACE MIAMI, FL 33173 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowerments. SIGNATURE: <i>Lesli A. Burkhead</i> DATE: 4-22-04 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			

Attachment 60421924



Division of Corporations

2004 Annual Report

Listed below is the most recent information reported for the entity.
Please review and click the appropriate button at the bottom to generate the annual report form.

This information cannot be changed on the report.	
Document Number	P03000119791
Business Entity Name	LESLI A. BURKHEAD, P.A.
Original File Date	10/27/2003

FEI Number	
Principal Address	7703 SW 102 PLACE MIAMI, FL 33173
Mailing Address	COLDWELL BANKER/BISHOP REALTY C/O LESLI A BURKHEAD, 7 NW 21 STREET HOMESTEAD, FL 33030
Registered Agent	LESLI A BURKHEAD 15250 SW 271 STREET HOMESTEAD, FL 33032 US

Officer/Director Name And Address

PSTD LESLI A BURKHEAD 7703 SW 102 PLACE MIAMI, FL 33173
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