

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000125016

Entity Name: DANIEL R. LEEMAN ENTERPRISES, INC.

FILED
Feb 13, 2007
Secretary of State

Current Principal Place of Business:

830 A1A NORTH #13
PONTE VEDRA BEACH, FL 32082

New Principal Place of Business:

830 A1A NORTH
SUITE #13
PONTE VEDRA BEACH, FL 32082

Current Mailing Address:

830 A1A NORTH #13
PONTE VEDRA BEACH, FL 32082

New Mailing Address:

830 A1A NORTH
SUITE #13
PONTE VEDRA BEACH, FL 32082

FEI Number: 75-3133342

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEEMAN, DANIEL R
830 A1A NORTH #13
PONTE VEDRA BEACH, FL 32082 US

Name and Address of New Registered Agent:

LEEMAN, DANIEL R DR.
830 A1A NORTH
SUITE #13
PONTE VEDRA BEACH, FL 32082 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: DR. DANIEL R. LEEMAN

02/13/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: LEEMAN, DANIEL R
Address: 830 A1A NORTH #13
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: VP () Delete
Name: OWENS, ROBERT
Address: 830 A1A NORTH SUITE 13
City-St-Zip: PONTE VEDRA BEACH, FL 32082

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: LEEMAN, DANIEL R DR.
Address: 830 A1A NORTH #13
City-St-Zip: PONTE VEDRA BEACH, FL 32082

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: DR. DANIEL R. LEEMAN

D

02/13/2007

Electronic Signature of Signing Officer or Director

Date