

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000125016

**FILED**  
**Jan 21, 2011**  
**Secretary of State**

**Entity Name:** DANIEL R. LEEMAN ENTERPRISES, INC.

**Current Principal Place of Business:**

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

**New Principal Place of Business:**

**Current Mailing Address:**

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

**New Mailing Address:**

**FEI Number:** 75-3133342

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

**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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

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

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

**Title:** TRES  
**Name:** NODA, KARA C  
**Address:** 830 A1A NORTH SUITE #13  
**City-St-Zip:** PONTE VEDRA BEACH, FL 32082

I hereby 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 all other like empowered.

**SIGNATURE:** DANIEL R LEEMAN

D

01/21/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date