

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000089099

FILED
Apr 22, 2006
Secretary of State

Entity Name: GOLD LEAF DISTRIBUTORS, INC.

Current Principal Place of Business:

4519 S. CORTEZ AVE.
TAMPA, FL 33611 US

New Principal Place of Business:

1716 SO. DALE MABRY HWY
TAMPA, FL 33629 US

Current Mailing Address:

4519 S. CORTEZ AVE.
TAMPA, FL 33611 US

New Mailing Address:

1716 SO. DALE MABRY
TAMPA, FL 33629 US

FEI Number: 20-1219719

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LACKEY, JOE K.
4519 S. CORTEZ AVE.
TAMPA, FL 33611 US

Name and Address of New Registered Agent:

LACKEY, JOE K.
1706 SO. DALE MABRY HWY
TAMPA, FL 33629 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:

04/22/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LACKEY, JOE K.
Address: 4519 S. CORTEZ AVE.
City-St-Zip: TAMPA, FL 33611 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LACKEY, JOE K.
Address: 1716 SO. DALE MABRY HWY
City-St-Zip: TAMPA, FL 33629 US

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: JOE K LACKEY

P

04/22/2006

Electronic Signature of Signing Officer or Director

Date