

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000091256

Entity Name: LEEPO, INC.

FILED  
Apr 16, 2009  
Secretary of State

## Current Principal Place of Business:

1104 SOUTH 8TH ST.  
FERNANDINA BEACH, FL 32034

## New Principal Place of Business:

## Current Mailing Address:

1104 SOUTH 8TH ST.  
FERNANDINA BEACH, FL 32034

## New Mailing Address:

FEI Number: 20-1266496

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LEEPER, EMMA L  
1724 SOUTH FLETCHER AVE.  
FERNANDINA BEACH, FL 32034 US

## Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: LEEPER, DANIEL B  
Address: P.O. BOX 250  
City-St-Zip: FERNANDINA BEACH, FL 32035

Title: VD ( ) Delete  
Name: LEEPER, KATE D  
Address: P.O. BOX 250  
City-St-Zip: FERNANDINA BEACH, FL 32035

Title: D ( ) Delete  
Name: LEEPER, WILLIAM H  
Address: 1745 SOUTH FLETCHER AVE.  
City-St-Zip: FERNANDINA BEACH, FL 32035

Title: PD ( ) Delete  
Name: LEEPER, EMMA L  
Address: 1745 SOUTH FLETCHER AVE.  
City-St-Zip: FERNANDINA BEACH, FL 32035

Title: D ( ) Delete  
Name: O'QUINN, JOHNNY J  
Address: 423 BONNIEVIEW RD.  
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: STD ( ) Delete  
Name: O'QUINN, BRENDA L  
Address: 423 BONNIEVIEW RD.  
City-St-Zip: FERNANDINA BEACH, FL 32034

## 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:

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 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: BRENDA O'QUINN

ST

04/16/2009

Electronic Signature of Signing Officer or Director

Date