


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 13, 2008 08:00 AM
Secretary of State

DOCUMENT # P04000161771 1. Entity Name LESLIE ENTERPRISES OF NAPLES, INC.	
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Principal Place of Business 1812 AVIAN CT. NAPLES, FL 34119	Mailing Address 1812 AVIAN CT. NAPLES, FL 34119
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DO NOT WRITE IN THIS SPACE



02282008 No Chg-P CR2E034 (11/05)

4. FEI Number 20-1951062	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PERSICH, LESLIE M
1812 AVIAN CT.
NAPLES, FL 34119

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS -

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD PERSICH, LESLIE M 1812 AVIAN CT. NAPLES, FL 34119
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 empowered.

SIGNATURE: Leslie Persich Leslie Persich 3/11/08 239-601-3408
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #