

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000013649

Entity Name: AVON LEASING, INC.

FILED
Feb 24, 2006
Secretary of State

Current Principal Place of Business:

114 W. MAIN STREET
LAKELAND, FL 33815 US

Current Mailing Address:

P.O. BOX 2896
LAKELAND, FL 33806 US

New Principal Place of Business:

114 W. MAIN STREET
SUITE A
LAKELAND, FL 33815 US

New Mailing Address:

FEI Number: 20-2417766 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WEEKS, JAMES M JR.
3922 CHEVERLY DRIVE
LAKELAND, FL 33813 US

Name and Address of New Registered Agent:

WEEKS, JULIAN J
2329 HOLLINGSWORTH HILL
LAKELAND, FL 33803 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: JULIAN J. WEEKS

02/24/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D, P () Delete
Name: WEEKS, JAMES M JR
Address: 114 W. MAIN ST
City-St-Zip: LAKELAND, FL 33815 US

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D, P (X) Change () Addition
Name: WEEKS, JULIAN J
Address: 2329 HOLLINGSWORTH HILL
City-St-Zip: LAKELAND, FL 33803 US

Title: S () Change (X) Addition
Name: WEEKS, JULIAN J
Address: 2329 HOLLINGSWORTH HILL
City-St-Zip: LAKELAND, FL 33803 US

Title: VP () Change (X) Addition
Name: SATFIELD, JOSEPH M
Address: 1940 LAKE SEWARD DRIVE
City-St-Zip: LAKELAND, FL 33813 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: JOSEPH SATFIELD

VP

02/24/2006

Electronic Signature of Signing Officer or Director

Date