

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000042348

**FILED**  
**May 03, 2011**  
**Secretary of State**

**Entity Name:** LESLIE PURDY, P. A.

**Current Principal Place of Business:**

463 N HARBOR CITY BLVD.  
MELBOURNE, FL 32935

**New Principal Place of Business:**

1188 ARNOLD DRIVE  
MELBOURNE, FL 32935

**Current Mailing Address:**

463 N HARBOR CITY BLVD.  
MELBOURNE, FL 32935

**New Mailing Address:**

PO BOX 361295  
MELBOURNE, FL 32936

**FEI Number:** 52-2455550

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PURDY, LESLIE  
463 N HARBOR CITY BLVD.  
MELBOURNE, FL 32935 US

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

PURDY, LESLIE  
1188 ARNOLD DRIVE  
MELBOURNE, FL 32935 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:** LESLIE PURDY

05/03/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** PRES  
**Name:** PURDY, LESLIE  
**Address:** PO BOX 361295  
**City-St-Zip:** MELBOURNE, FL 32936

**Title:** VP  
**Name:** PURDY, LESLIE  
**Address:** PO BOX 361295  
**City-St-Zip:** MELBOURNE, FL 32936

**Title:** S  
**Name:** PURDY, LESLIE  
**Address:** PO BOX 361295  
**City-St-Zip:** MELBOURNE, FL 32936

**Title:** T  
**Name:** PURDY, LESLIE  
**Address:** PO BOX 361295  
**City-St-Zip:** MELBOURNE, FL 32936

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:** LESLIE PURDY, PA

PRES

05/03/2011

Electronic Signature of Signing Officer or Director

Date