2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000056888

Entity Name: FLESHER INDUSTRIES, INC.

FILED Mar 01, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5592 LEE STREET SUITE 3

LEHIGH ACRES, FL 33971

Current Mailing Address: New Mailing Address:

8644 ATHENA COURT 104 DANIA CIRCLE

LEHIGH ACRES, FL 33971 LEHIGH ACRES, FL 33936

FEI Number: 37-1508203 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

NEWTON, DAVID L NEWTON, DAVID L 8644 ATHENA COURT 104 DANIA CIRCLE

LEHIGH ACRES, FL 33971 US LEHIGH ACRES, FL 33936 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: DAVID L NEWTON 03/01/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT () Delete Title: PT (X) Change () Addition

 Name:
 NEWTON, DAVID L
 Name:
 NEWTON, DAVID L

 Address:
 8644 ATHENA COURT
 Address:
 104 DANIA CIRCLE

 City-St-Zip:
 LEHIGH ACRES, FL 33971
 City-St-Zip:
 LEHIGH ACRES, FL 33936

Title: CEO (X) Delete Title: () Change () Addition

 Name:
 FLESHER, JAMES J
 Name:

 Address:
 2115 SW 41ST ST
 Address:

 City-St-Zip:
 CAPE CORAL, FL 33914
 City-St-Zip:

Title: S () Delete Title: () Change () Addition

 Name:
 FLESHER, TRACY AMBER
 Name:

 Address:
 2115 SW 41ST ST
 Address:

 City-St-Zip:
 CAPE CORAL, FL 33914
 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: DAVID L NEWTON PRES 03/01/2009