

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 30, 2007 8:00 am**  
**Secretary of State**

04-30-2007 90385 018 \*\*\*158.75

DOCUMENT # P05000099717

1. Entity Name

LEE ALLYN INVESTMENTS INC.



Principal Place of Business

1899 KENTUCKY AVE.  
SUITE #B  
WINTER PARK FL 32789

Mailing Address

1899 KENTUCKY AVE.  
SUITE #B  
WINTER PARK FL 32789



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

1st MOORE

CR2E034 (10/06)

City & State

City & State

4. FEI Number 30-0328371

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DUNN, JEFFREY  
1899 KENTUCKY AVE.  
SUITE #B  
WINTER PARK FL 32789

Name DUNN, COREY

Street Address (P.O. Box Number is Not Acceptable)  
252 VIA RUSSO LANE

City LAKE MARY

FL

Zip Code 32746

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

*Corey Dunn* D. U.P. P. S. T. COREY DUNN  
*Jeffrey Dunn* Director

4-17-07

Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2007 Fee Will Be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing Trust Fund Contribution. ☐

**\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D  
NAME DUNN, JEFFREY ☒ Delete  
STREET ADDRESS 1899 KENTUCKY AVE.  
CITY- ST- ZIP WINTER PARK FL 32789

TITLE D, P, U, S, T  
NAME DUNN, COREY ☐ Change ☒ Addition  
STREET ADDRESS 252 VIA RUSSO LANE  
CITY- ST- ZIP LAKE MARY, FL. 32746

TITLE  
NAME ☐ Delete  
STREET ADDRESS  
CITY- ST- ZIP

TITLE  
NAME ☐ Change ☐ Addition  
STREET ADDRESS  
CITY- ST- ZIP

TITLE  
NAME ☐ Delete  
STREET ADDRESS  
CITY- ST- ZIP

TITLE  
NAME ☐ Change ☐ Addition  
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CITY- ST- ZIP

TITLE  
NAME ☐ Change ☐ Addition  
STREET ADDRESS  
CITY- ST- ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

*Jeffrey A. Dunn*

Jeffrey A. DUNN Director 407-629-7643

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date 4-17-07

Daytime Phone #