2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000138776

Entity Name: LEE LOGISTICS CORP.

FILED Apr 21, 2006 Secretary of State

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

6118 SCHOOL HOUSE COURT 1530 VILLA CAPRI CIRCLE WESLEY CHAPEL, FL 33544

#307

ODESSA, FL 33556

Current Mailing Address: New Mailing Address:

PO BOX 22113 PO BOX 26952 TAMPA, FL 33623 TAMPA, FL 33622

FEI Number: 20-3613825 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

WOODALL, GAY L WOODALL, GAY L 6118 SCHÓOL HOUSE COURT 1530 VILLA CAPRI CIRCLE WESLEY CHAPEL, FL 33544 US #307 ODESSA, FL 33556 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: GAY L WOODALL 04/21/2006

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

WOODALL, GAY L WOODALL, GAY L Name: Name: 6118 SCHOOL HOUSE COURT Address: 1530 VILLA CAPRI CIRCLE #307 Address:

City-St-Zip: WESLEY CHAPEL, FL 33544 City-St-Zip: ODESSA, FL 33556

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutés. 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: GAY L WOODALL 04/21/2006 D

Electronic Signature of Signing Officer or Director

Date