2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000146798

Entity Name: PPD LEASING & MANAGEMENT, INC.

FILED Feb 24, 2009 Secretary of State

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

785 BIG TREE DRIVE 1370 PINE WAY SUITE 105 SUITE 'A'

LONGWOOD, FL 32750 US SANFORD, FL 32773 US

Current Mailing Address: New Mailing Address:

785 BIG TREE DRIVE PO BOX 954053

SUITE 105 LAKE MARY, FL 32795 US

LONGWOOD, FL 32750 US

FEI Number: 20-3759727 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:

DUNKMAN, PAUL
785 BIG TREE DRIVE
SUITE 105

DUNKMAN, PAUL
1370 PINE WAY
SUITE 'A'

LONGWOOD, FL 32750 US SANFORD, FL 32773 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: 02/24/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D,P () Delete Title: D,P (X) Change () Addition

 Name:
 DUNKMAN, PAUL
 Name:
 DUNKMAN, PAUL

 Address:
 785 BIG TREE DRIVE, SUITE 105
 Address:
 1370 PINE WAY, SUITE 'A'

 City-St-Zip:
 LONGWOOD, FL 32750 US
 City-St-Zip:
 SANFORD, FL 32773 US

Title: D,VP () Delete Title: D,VP (X) Change () Addition

Name: DUNKMAN, PAULA
Address: 785 BIG TREE DRIVE, SUITE 105
City-St-Zip: LONGWOOD, FL 32750 US

Name: DUNKMAN, PAULA
Address: 1370 PINE WAY, SUITE 'A'
City-St-Zip: SANFORD, FL 32773 US

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: PAULA DUNKMAN D,VP 02/24/2009