## **2007 FOR PROFIT CORPORATION**

## **ANNUAL REPORT**

DOCUMENT # P06000147519



FILED Mar 26, 2007 8:00 am Secretary of State

1. Entity Nam LEIGH &		ATES, INC					03-26-2007	90058 04.	3 ****13(	J.00
Principal Place of Business Mailing Address 4559 32ND AVENUE NO 4559 32ND A ST PETERSBURG, FL 33713 ST PETERSBU				oress ND AVENUE NO ISBURG, FL 33713						
Principal Place of Business - No P.O. Box # 3. Mailing Address										
Suite, Apt. #, etc.		Suite, Apt. #, etc.			03062007	Chg-P	CR2E034	(12/06)		
City & State		City & State			4. FEI Numbe 20–595			<del>}  </del>	plied For t Applicable	
Zip			Zip				of Status Desired	□ Fe	<b>8.75</b> Addi e Required	
	6. Name	and Address of Current	Registered Agent		Nome	7. Name and	Address of New R	egistered Ag	ent	
LEIGH, TIMOTHY G 4559 32ND AVENUE NORTH ST PETERSBURG, FL 33713					Name Street Address (P.O. Box Number is Not Acceptable)					
	•				City				Zip Code	,
					·			FL	·	j
	named entit tions of regist		or the purpose of changing its	register	ed office or regist	tered agent, or bot	h, in the State of Flo	orida. Iam far	nitiar with, a	and accept
	-	-								
SIGNATURE	Signature, typed	or printed name of registered agent	and title if applicable. (NOT	E: Registere	d Agent signature requir	red when reinstating)		DATE		
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00  9. Election Campaign Financing Trust Fund Contribution.										
	E NOW!!!		- '- '- '	-		5.00 May Be dded to Fees				
	E NOW!!!		GO Trust Fund Cont	-		dded to Fees	CHANGES TO OFF	ICERS AND D	DIRECTORS	S IN 11
After Ma	E NOW!!! ay 1, 200	7 Fee will be \$550. OFFICERS AND	GO Trust Fund Cont	11.	□ Ã	dded to Fees	CHANGES TO OFF		DIRECTORS	S IN 11
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Interpoy censity that the information supplied with this litting does not qualify for the exemptions contained 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 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 empoyered.

SIGNATURE:

NG OFFICER OR DIRECTOR