# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Jun 23, 2009**
**Secretary of State**

DOCUMENT# P08000093473

**Entity Name:** LEROUGE ENTERPRISES, INC.

**Current Principal Place of Business:**

433 WOOD ROSE LANE
ALTAMONTE SPRINGS, FL 32714

**New Principal Place of Business:**

805 MAGNOLIA DR
ALTAMONTE SPRINGS, FL 32701

**Current Mailing Address:**

433 WOOD ROSE LANE
ALTAMONTE SPRINGS, FL 32714

**New Mailing Address:**

805 MAGNOLIA DR
ALTAMONTE SPRINGS, FL 32701

**FEI Number: 26-3572029** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

LEROUGE, KIMARAH
433 WOOD ROSE LANE
ALTAMONTE SPRINGS, FL FL 32714 US

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

LEROUGE, KIMARAH
805 MAGNOLIA DR
ALTAMONTE SPRINGS, FL 32701 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: 06/23/2009
Electronic Signature of Registered Agent — Date

**In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.**
**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P, T ( ) Delete
Name: LEROUGE, KIMARAH C
Address: 433 WOOD ROSE LANE
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: VP ( ) Delete
Name: JOEY, BERMUDEZ
Address: 7685 W HIGHWAY 98, APT 175
City-St-Zip: PENSACOLA, FL 32506

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

Title: P, T (X) Change ( ) Addition
Name: LEROUGE, KIMARAH C
Address: 805 MAGNOLIA DR
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: VP (X) Change ( ) Addition
Name: JOEY, BERMUDEZ
Address: 805 MAGNOLIA DR
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

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: KIMARAH LEROUGE MS 06/23/2009
Electronic Signature of Signing Officer or Director — Date