


# 2006 FOR PROFIT CORPORATION REINSTATEMENT

<b>DOCUMENT # P10395</b> 1. Entity Name <b>LESLIE CO. OF NEW JERSEY</b>						<b>FILED</b> <b>06 MAY 10 PM 2: 15</b> <b>SECRETARY OF STATE</b> <b>TALLAHASSEE, FLORIDA</b>	
Principal Place of Business <b>12501 TELECOM DRIVE</b> <b>TAMPA, FL 33637-0906</b>				Mailing Address <b>12501 TELECOM DRIVE</b> <b>TAMPA, FL 33637-0906</b>			
2. Principal Place of Business				3. Mailing Address			
Suite, Apt. #, etc.				Suite, Apt. #, etc.			
City & State				City & State			
Zip		Country		Zip		Country	
<b>6. Name and Address of Current Registered Agent</b> <b>LUEPTOW, RONALD S</b> <b>12501 TELECOM DRIVE</b> <b>TAMPA, FL 33637-0906</b>				<b>7. Name and Address of New Registered Agent</b> Name <b>Nick Turco</b> Street Address (P.O. Box Number is Not Acceptable) <b>12501 Telecom Drive</b> City <b>Tampa</b> <b>FL</b> Zip Code <b>33637-0906</b>			
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. <i>Nick Turco</i>							
SIGNATURE <i>Nick Turco</i> (NOTE: Registered Agent signature required when reinstating) DATE _____							
<b>FILE NOW!!! FEE IS \$900.00</b>							
<b>10. OFFICERS AND DIRECTORS</b>				<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BLOSS, DAVID A SR 35 CORPORATE DRIVE BURLINGTON, MA 01803	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S GLASS, ALAN J 35 CORPORATE DRIVE BURLINGTON, MA 01803	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	300075038393 05/22/06--01067--017 **900.00		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ATC LUEPTOW, RONALD S 12501 TELECOM DR. TAMPA, FL 33637	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP-FINANCE Nick Turco 12501 Telecom Drive Tampa, FL 33637		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS CARRIERE, STEPHEN J 35 CORPORATE DRIVE BURLINGTON, MA 01803	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Controller Jack Kuber 35 Corporate Drive Burlington, MA 01803		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP CARLSEN, ALAN R 12501 TELECOM DRIVE TAMPA, FL 33637	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	John Cope		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPT SMITH, KENNETH W 35 CORPORATE DRIVE BURLINGTON, MA 01803	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP CFO		
12. I hereby certify that the information supplied with this filing 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 empowered.							
SIGNATURE: <i>Nick Turco</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				4/21/06 Date			
				813 910 -6546 Daytime Phone #			