


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 12, 2008 8:00 am
Secretary of State

05-12-2008 90033 032 ***150.00

DOCUMENT # P10395 1. Entity Name LESLIE CO. OF NEW JERSEY					
Principal Place of Business 12501 TELECOM DRIVE TAMPA, FL 33637-0906			Mailing Address 12501 TELECOM DRIVE TAMPA, FL 33637-0906		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State Zip		City & State Zip		4. FEI Number 22-1063780 Applied For <input type="checkbox"/> Not Applicable	
Country		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent TURCO, NICK 12501 TELECOM DRIVE TAMPA, FL 33637-0906				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>	
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.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO BLOSS, DAVID A SR 35 CORPORATE DRIVE BURLINGTON, MA 01803	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO A William Higgins 35 Corporate Drive Burlington, MA 01803	<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	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V TURCO, NICK 12501 TELECOM DR. TAMPA, FL 33637	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VC KUBER, JACK 35 CORPORATE DRIVE BURLINGTON, MA 01803	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP COPE, JOHN 12501 TELECOM DRIVE TAMPA, FL 33637	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCFO SMITH, KENNETH W 35 CORPORATE DRIVE BURLINGTON, MA 01803	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCFO Fred Burditt 35 Corporate Drive Burlington, MA 01803	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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: <u>Nick Turco</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Date: <u>4/23/08</u> <small>Date Daytime Phone #</small>		



LESLIE
CONTROLS, INC.

ATTACHMENT

40101019

#P10395

12501 Telecom Drive • Tampa, FL 33637 • USA • (813) 978-1000 • Fax: (813) 977-0174 • www.lesliecontrols.com

Florida Dept. of State
Division of Corporations
PO Box 1500
Tallahassee, FL 32302-1500

Please be advised that we sent a check for our registration on 4/17/08. At that time, the check was mailed without including our annual report.

I called to see if the check had been received, and was told that it was not in the system.

We have stopped payment on our original check #204587. I am attaching our report, along with a new check.

I would be very appreciative if you would waive our late fees, as this was an error on our part; and was not done intentionally.

Thank you.

Ann Mitchell
Senior Accountant