# FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

### **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P93000061555 1. Corporation Name

LEISURE RESEARCH, INC.

Principal Place of Business 3709 CARDINAL BLVD. DAYTONA BCH. FL 32127

Mailing Address

3709 CARDINAL BLVD. DAYTONA BCH. FL 32127

# FILED May 07, 1999 8:00 am Secretary of State

05-07-1999 90113 039 \*\*\*150.00



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						3. Date Incorporated or Qualifed			
						08/30/1993			
2. Principal Pl	lace of Business	2a. Mailing Address				4. FEI Number		Api	olied For
21		26				59-3209598		No	Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	•					\$8.75 A	dditional
22		27			]	5. Certifcate of Status Desired	<b>⊢</b>	Fee Re	quired
City & State	e	City & State				6. Election Campaign Financing		\$5.00	May Be
23		28				Trust Fund Contribution		Added to	Fees
Zip	Country	Zip	Countr	у		8. This corporation owes the curren	nt year Intang	jible	
24	25	29	0			Personal Property Tax.		Yes	<b>₽</b> No
	9. Name and Address of Current	Registered Agent			1	<ol><li>Name and Address of New Re</li></ol>	gistered Ag	ent	
			8	1 Name					
Partin, ralph t				82 Street Address (P.O. Box Number is Not Acceptable)					
	CARDINAL BLVD.		62 Street Add			(F.O. Box Hamber is Not Acceptab	,,,,,		ĺ
DAY	TONA BCH. FL 32127		83						
			<u> </u>						
			8-	4 City			FL	35 Zip C	ode
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes	, the abo	ve-named	corporat	tion submits this statement for the p	urpose of cha	inging its	registered
office or re	egistered agent, or both, in the State of medical factors and accept the obligation	f Florida. Such change was auth	horized b	y the corp	oration's	board of directors. I hereby accept	the appointm	ent as rec	jistered
	m lamillar with, and accept the congula	5/15 5/1, 555010/1 557.5555, 7 15/15							
SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registere					required who	en reinstating)	DATE		
12.	OFFICERS AND	DIRECTORS	13.			ADDITIONS/CHANGES TO OFF	ICERS AND I	DIRECTO	RS IN 12
TITLE	D	☐ DELETE	1.1 TITLE					] Change	☐ Addition
NAME	PARTIN, RALPH T		1,2 NAME	:					
STREET ADDRESS	3709 CARDINAL BLVD.		1.3 STRE	ET ADDRESS					- 1
CITY-ST-ZIP	DAYTONA BCH. FL 32127		1.4 CITY-						
TITLE	D	DELETE	2.1 TITLE			-		] Change	☐ Addition
NAME	THAXTON, GLENN	_	2.2 NAME	:					1
Į	3709 CARDINAL BLVD.			ET ADDRESS					
STREET ADDRESS			2.4 CITY		'				ĺ
CITY-ST-ZIP TITLE	DAYTONA BCH. FL 32127	☐ DELETE	3.1 TITLE		-		<u>.</u>	] Change	Addition
		_, 0	3.2 NAME				-		
NAME									į
STREET ADDRESS				ET ADDRESS	,				
C/TY-ST-Z/P		☐ DELETE	3.4. CITY 4.1 TITLE					Change	Addition
TITLE							_		
NAME			4. 2 NAMI						ļ
STREET ADDRESS				ET ADDRESS	`				Ì
CITY-ST-ZIP	-	Delete	4.4 CITY-		-			7 Change	Addition
TITLE		☐ DELETE	5.1 TITLE				L	] Glange	
NAME			5 2 NAME		.]				ì
STREET ADDRESS				ET ADDRESS	1				
CITY-ST-ZIP			54 CITY-					7.01	
TITLE		☐ DELETE	6.1 TITLE					] Change	☐ Addition
NAME			6.2 NAME						1
STREET ADDRESS			6.3 STRE	ET ADDRESS	3				
CITY-ST-ZIP	.,,		6.4 CITY-	ST-ZIP					

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changes, or on an attachment with an address, with all other like empowered.

SIGNATURE: