

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 31, 2002 8:00 am
Secretary of State

03-31-2002 90055 006 ***150.00

0066753 AV

DOCUMENT # P93000070955

1. Entity Name
LEOPAT, INC.

Principal Place of Business 17313 NW HWY 19 TRENTON FL 32693 US	Mailing Address 114 NE FIRST ST TRENTON FL 32693
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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City & State	City & State	4. FEI Number 65-0484198	Applied For <input type="checkbox"/> Not Applicable
Zip	Country	Zip	Country
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent BURT, TED ESQ BURT & FEATHER, PA 114 NE FIRST ST TRENTON FL 32693		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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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.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input type="checkbox"/>	FILE NOW!!! FEE IS \$150.00 After May 1, 2002 Fee will be \$550.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSP COOK, PATTI L 17313 NW HWY 19 TRENTON FL 32693 <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	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Patti L Cook* **President** **3/19/02** **352-463-0040**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)

Attachment

BURT & FEATHER
Attorneys at Law
114 Northeast First Street
Post Office Box 308
Trenton, Florida 32693

#193000070953

614796

Theodore M. Burt
Mark J. Feather
Patti Lee Meeks

(352) 463-2348
fax (352) 463-6908

March 19, 2002

Department of State
Division of Corporations
Post Office Box 1500
Tallahassee, Florida 32302-1500

Re: Leopat, Inc.

Gentlemen:

Enclosed please find the 2002 Uniform Business Report regarding the referenced corporation, together with a check in the amount of \$150.00 to cover the filing fee.

Yours truly,

Susan Thorsen

Susan Thorsen
Legal Assistant

/st

Enclosures: Report
 Check

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