

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 18, 2003 8:00 am
Secretary of State

0072025
AV

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1. Entity Name
LEOPAT, INC.

03-18-2003 90061 003 ***150.00

Principal Place of Business
**17313 NW HWY 19
TRENTON FL 32693
US**

Mailing Address
**114 NE FIRST ST
TRENTON FL 32693**



2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

CHECK HERE IF MAKING CHANGES

City & State

4. FEI Number **65-0484198** Applied For
Not Applicable

Zip Country Zip Country

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**BURT, TED ESQ
BURT & FEATHER, PAX
114 NE FIRST ST
TRENTON FL 32693**

Name
Theodore M. Burt, Esquire (Correction)

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

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

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. **\$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	<input checked="" type="checkbox"/> Delete COOK, PATTI L 17313 NW HWY 19 TRENTON FL 32693	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition PD ST William L. Rutledge 17751 NW Highway 19 Trenton FL 32693
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" 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

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Patti Cook* **President** 3-12-03 352-463-0040
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)

Attachment #

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

70030148
P93000070955

Theodore M. Burt
Mark J. Feather
Patti Lee Meeks

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

March 17, 2003

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

Re: Leopat, Inc.
FEI #65-0484198

Gentlemen:

Enclosed please find the 2003 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
Legal Assistant

/st

Enclosures: Report
Check

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