

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 12, 2005 8:00 am
Secretary of State

04-12-2005 90124 028 ***150.00

DOCUMENT # P93000086183

1. Entity Name

EARL D. LEURCK, P.A.



Principal Place of Business

10219 GREENTRAIL DR. NORTH
BOYNTON BEACH FL 33436

Mailing Address

10219 GREENTRAIL DR. NORTH
BOYNTON BEACH FL 33436

2. Principal Place of Business

1549 Highway 903
Suite, Apt. #, etc.

3. Mailing Address

1549 Highway 903
Suite, Apt. #, etc.

City & State

BRACEY, VA

City & State

BRACEY, VA

Zip

23919

Country

US

Zip

23919

Country

US

4. FEI Number

65-0454628

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

LEURCK, EARL D
10219 GREENTRAIL DR N
BOYNTON BEACH FL 33436

7. Name and Address of New Registered Agent

Name: Jeff Tomberg Esq
Street Address (P.O. Box Number is Not Acceptable): 626 SE 4th St

City: BOYNTON BCH FL Zip Code: 33435

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

Signature: typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4/1/05

FILE NOW!! FEE IS \$150.00

After May 1, 2005 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

TITLE: P
NAME: LEURCK, EARL D
STREET ADDRESS: 10219 GREENTRAIL DR., NORTH
CITY-ST-ZIP: BOYNTON BEACH FL ☐ Delete

TITLE: S
NAME: LEURCK, NATALIE B
STREET ADDRESS: 10219 GREENTRAIL DR NO
CITY-ST-ZIP: BOYNTON BCH FL ☒ Delete

TITLE: ☐ Delete
NAME:
STREET ADDRESS:
CITY-ST-ZIP:
☐ Delete

TITLE: ☐ Delete
NAME:
STREET ADDRESS:
CITY-ST-ZIP:
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TITLE: ☐ Delete
NAME:
STREET ADDRESS:
CITY-ST-ZIP:
☐ Delete

TITLE: ☐ Delete
NAME:
STREET ADDRESS:
CITY-ST-ZIP:
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE: P
NAME: LEURCK, EARL D.
STREET ADDRESS: 1549 Highway 903
CITY-ST-ZIP: BRACEY, VA. 23919 ☒ Change ☐ Addition

TITLE: S
NAME: LEURCK, EARL D.
STREET ADDRESS: 1549 Highway 903
CITY-ST-ZIP: BRACEY, VA 23919 ☐ Change ☒ Addition

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-ST-ZIP:
☐ Change ☐ Addition

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-ST-ZIP:
☐ Change ☐ Addition

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-ST-ZIP:
☐ Change ☐ Addition

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-ST-ZIP:
☐ Change ☐ 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: Earl D. Leurck EARL D. LEURCK

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/27/05

Date

4349179425

Daytime Phone #