

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

10f2

DOCUMENT # P94000035975

1. Entity Name
LEON C. BAKER P.A.



FILED

07 FEB 13 AM 10:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business
7123 AYRSHIRE LANE
BOCA RATON FL 33496

Mailing Address
7123 AYRSHIRE LANE
BOCA RATON FL 33496

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E034 (10/06)

87

4. FEI Number 65-0524936

Applied For
Not Applicable

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

BAKER, LEON C
7123 AYRSHIRE LANE
BOCA RATON FL 33496

Name

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

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

(NOTE: Registered Agent signature required when constituting)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing **\$5.00** May Be
Trust Fund Contribution. ☐ Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY ST ZIP
DP
BAKER, LEON C
7123 AYRSHIRE LANE
BOCA RATON FL 33496 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY ST ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY ST ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY ST ZIP ☐ Change ☐ Addition
200088465502
02/16/07--01005--017 **158.75

TITLE
NAME
STREET ADDRESS
CITY ST ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY ST ZIP ☐ Change ☐ Addition

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CITY ST ZIP ☐ Change ☐ Addition

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STREET ADDRESS
CITY ST ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY ST ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Leon C. Baker 561-482-

Feb 2007

Daytime Phone # 6604

282

LEON C. BAKER
Attorney at Law
7123 Ayrshire Lane
Boca Raton, Florida 33496

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(561) 482-6631
Fax (561) 482-1062

February 7, 2007

Barbara Mitchell
Document Specialist
Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Re: Your Letter Number 007A00005913

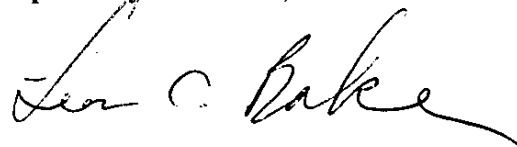
Dear Ms Mitchell:

On January 18, 2007 I wrote a letter to your Annual Report Section (P.O. 6850) which I now have learned was mistaken. I told them that Leon C. Baker P.A. is a New York corporation which does business only in New York and, therefore, is not required to file an annual report with the State of Florida.

It has now been called to my attention that I had confused Leon C. Baker P.A with a New York corporation which has a similar name—Leon C. Baker P. C. I apologize for my confusion and any inconvenience I may caused to others.

I enclose the Annual Report and a check for \$ 158.75 to cover the annual fee and a Certificate of Status (Item 5 of the report).

Respectfully submitted,



Leon C. Baker