

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000060855

FILED  
Mar 30, 2009  
Secretary of State

Entity Name: LEATHER MEDIC INC.

## Current Principal Place of Business:

13891 JETPORT LOOP ROAD  
# 24  
FT MYERS, FL 33913 US

## New Principal Place of Business:

## Current Mailing Address:

13891 JETPORT LOOP ROAD  
# 24  
FT MYERS, FL 33913 US

## New Mailing Address:

FEI Number: 65-0603205

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LIFE, KYLE  
13891 JETPORT LOOP ROAD  
#24  
FT MYERS, FL 33913 US

## Name and Address of New Registered Agent:

LIFE, CHADE  
13891 JETPORT LOOP ROAD  
#24  
FT MYERS, FL 33913 US

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: CHADE LIFE

03/30/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: LIFE, KYLE  
Address: 13891 JETPORT LOOP ROAD #24  
City-St-Zip: FT MYERS, FL 33913

Title: VP ( ) Delete  
Name: LIFE, CHADE  
Address: 13891 JETPORT LOOP ROAD #24  
City-St-Zip: FT. MYERS, FL 33913

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: LIFE, CHADE  
Address: 13891 JETPORT LOOP ROAD #24  
City-St-Zip: FT MYERS, FL 33913

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHADE LIFE

P

03/30/2009

Electronic Signature of Signing Officer or Director

Date