

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

08-01-2005 90023 048 ***150.00
P96000031573

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



1st MOORE CR2E034 (10/04)

DOCUMENT # P96000031573

1. Entity Name

LEGAL EASE CORP.



Principal Place of Business

3884 TAMPA RD.
OLDSMAR FL 34677
US

Mailing Address

3884 TAMPA RD.
OLDSMAR FL 34677
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3384566

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

PFRENGLE, KENNETH
3884 TAMPA RD.
OLDSMAR FL 34677

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 fee if applicable

(NOTE: Registered Agent signature required when re-registering)

DATE

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
NAME P
STREET ADDRESS PFRENGLE, KENNETH
CITY- ST- ZIP 3884 TAMPA RD.
OLDSMAR FL 34677

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY- ST- ZIP

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

[Handwritten Signature]
8/24

22 205 83855020

7 22 2005

State of Florida
Corporate Annual Reporting

TO WHOM IT MAY CONCERN:

Attached are annual reports for the following corporations

Corp Name	FEI #	Document #
General Purpose	59 3367102	P95 000096756
✓ General Industrial	59 3377966	P95000024975
✓ Florida Blower	59 2753267	J 34989
✓ Eagle Mini	59 3273944	p94000072222
✓ Commercial	59 3377966	p96000024984
✓ Legal Ease	59 3384566	p96000031573
✓ Anastasia	59 3514230	p980000051706

All of these reports were received after July 1, 2005, thus making them all delinquent before there was an opportunity to take advantage of the normal renewal rate. Realizing that the delinquency is not a result of Corporate neglect, but State neglect, checks are attached for \$150.00 normal rate.

A check is also attached for Oxford Property Management Inc, FEI 59 3422438, for which no return was sent

Respectfully,

Kenn Pfrengle
3884 Tampa Rd
Oldsmar, FL 34677

813 855 0210

8-23-05

To: Michelle I...

@ 850-245 6047
by Fax

Please Confirm 2012
Thank you