2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 07, 2005 8:00 am
Secretary of State
04-07-2005 90023 026 ***150.00

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1. Entity Name
LESLIE BAENEN, INC.

Principal Place of Business
5169 103RD STREET NORTH
ST PETERSBURG, FL 33708 US

Mailing Address
5169 103RD STREET NORTH
ST PETERSBURG, FL 33708 US

04042005 Chg-P CR2E034 (10/03)

2. Principal Place of Business
5169 103 STREET N.
Suite, Apt. #, etc.
City & State
ST. PETERSBURG FL
Zip 33708
Country

3. Mailing Address
5169 103 STREET N.
Suite, Apt. #, etc.
City & State
ST. PETERSBURG FL
Zip 33708
Country

4. FEI Number
59-3388730
Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

BAENEN, LESLIE J
6016 98TH WAY NORTH
ST PETERSBURG, FL 33708

7. Name and Address of New Registered Agent

Name
BAENEN, LESLIE J
Street Address (P.O. Box Number is Not Acceptable)
5169 103 STREET N.
City ST PETERSBURG FL Zip Code 33708

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

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

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

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	
D	BAENEN, LESLIE J	6016 98TH WAY NORTH	ST PETERSBURG, FL 33708	☐ Delete
				☐ Delete
				☐ Delete
				☐ Delete
				☐ Delete
				☐ Delete
				☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	
P	BAENEN, LESLIE J.	5169 103 STREET N.	ST. PETERSBURG FL 33708	☒ Change ☐ Addition
				☐ Change ☐ Addition
				☐ Change ☐ Addition
				☐ Change ☐ Addition
				☐ Change ☐ Addition
				☐ Change ☐ Addition
				☐ 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: 4-4-05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR LESLIE J. BAENEN, PRES. Date Daytime Phone #