

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 13, 2006 8:00 am
Secretary of State

03-13-2006 90084 041 ***150.00

DOCUMENT # P97000036446

1. Entity Name
LESLEY MAXWELL INTERIORS, INC.



Principal Place of Business
**658 W. INDIANTOWN ROAD
SUITE 207
JUPITER, FL 33458**

Mailing Address
**658 W. INDIANTOWN ROAD
SUITE 207
JUPITER, FL 33458**

50002284



2. Principal Place of Business
500 UNIVERSITY BLVD

3. Mailing Address
500 UNIVERSITY BLVD

Suite, Apt. #, etc.
104

Suite, Apt. #, etc.
104

02232006 Chg-P CR2E034 (11/05)

City & State
JUPITER, FL

City & State
JUPITER, FL

4. FEI Number
65-0752457

Applied For
Not Applicable

Zip
33458

Country

Zip
33458

Country

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

6. Name and Address of Current Registered Agent

**MAXWELL, MICHAEL
658 W INDIANTOWN ROAD
SUITE 207
JUPITER, FL 33458**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

500 UNIVERSITY BLVD, SUITE 104

City
JUPITER

FL

Zip Code
33458

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

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
NAME **HANFORD-MAXWELL, LESLEY**
STREET ADDRESS **658 W. INDIANTOWN ROAD, SUITE 207**
CITY - ST - ZIP **JUPITER, FL 33458**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY - ST - ZIP

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TITLE ☐ Delete
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STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY - ST - ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS **500 UNIVERSITY BLVD, SUITE #104**
CITY - ST - ZIP **JUPITER, FL 33458**

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

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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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 exemptions contained 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 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

3/9/06

Date

561 626 7116

Daytime Phone #