

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000086340

Entity Name: FLORIDA LEISURE INC.

FILED  
Apr 19, 2005  
Secretary of State

## Current Principal Place of Business:

4620 CUMBRIAN LANES DRIVE  
KISSIMMEE, FL 34746

## New Principal Place of Business:

## Current Mailing Address:

4620 CUMBRIAN LANES DRIVE  
KISSIMMEE, FL 34746

## New Mailing Address:

FEI Number: 65-0797121

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WORRALL, MARION  
4620 CUMBRIAN LAKES DRIVE  
KISSIMMEE, FL 34746 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: WORRALL, NIGEL  
Address: 4620 CUMBRIAN LAKES DRIVE  
City-St-Zip: KISSIMMEE, FL 34746

Title: VS ( ) Delete  
Name: WORRALL, MARION  
Address: 4620 CUMBRIAN LAKES DRIVE  
City-St-Zip: KISSIMMEE, FL 34746

Title: V ( ) Delete  
Name: WORRALL, ANDREW  
Address: 2903 SUNSET VISTA CT.  
City-St-Zip: KISSIMMEE, FL 34747

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: MARION WORRALL

VS

04/19/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date