## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P97000095565

1. Entity Name

TITLE NAME STREET ADDRESS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE

CITY-ST-ZIP

STREET ADDRESS

## FILED Jan 07, 2005 08:00 AM Secretary of State

LEAD CO	PRPORATION			"			
Principal Place 1220 ROXME TAMPA, FL 3	ERE ROAD	lailing Address 1220 ROXMERE ROAD FAMPA, FL 33629					
D	O NOT WRITE II	N THIS SPA	CE	01052005 4. FEI Number 59-348		CR2E034 (1	Applied For Not Applicable
				5. Certificate	of Status Desired		75 Additional Required
	6. Name and Address of Current Regis	stered Agent	<del> </del>	<u> </u>	·		
#3700 TAMPA, Fi	NNEDY BLVD.  L 33602 = named entity submits this statement for the lons of registered agent.	purpose of changing its register	red office or registe	IN T	NOT W	ACE	ar with, and accept
SIGNATURE_	Signature, typed or printed name of registered agent and title	If applicable (NOTE: Register	ed Agent signature require	ed when reinstating)	<del></del>	DATE	
FIL After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.00	Siection Campaign Fina     Trust Fund Contribution.		5.00 May Be ded to Fees			
10.	OFFICERS AND DIRE	CTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P JENNEWEIN, DON 1220 ROXMERE ROAD TAMPA, FL 33629				U00000 01/07/05-8	173126 30007-008	3 150.nn
TITLE NAME STREET ADDRESS	ST JENNEWEIN, LESLIE 1220 ROXMERE ROAD				·	~ -	

12. Thereby certify that the information supplied with this filling 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 empewered 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 TYPEO OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DON JETTINGWE 111

15/05 0005

DO NOT WRITE

IN THIS SPACE