2006 FOR PROFIT CORPORATION

FILED **ANNUAL REPORT** Jul 10, 2006 08:00 AN **DOCUMENT # P97000095565** Secretary of State 1. Entity Name LEAD CORPORATION Principal Place of Business Mailing Address 1220 ROXMERE ROAD 1220 ROXMERE ROAD TAMPA, FL 33629 TAMPA, FL 33629 $\mathcal{A}_{n}[j][k_{n}[j]] \in \mathcal{A}$ 07062006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3480567 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Regulred 6. Name and Address of Current Registered Agent DO NOT WRITE JENNEWEIN, JONATHAN P 101 E. KENNEDY BLVD. #3700 THIS SPACE TAMPA, FL 33602 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. U00000569114 07/11/06-80012-021 150.00 Signature, typed or printed name of registered agent and title if applicable. (NOTE; Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. Added to Fees corporation did not receive the prior notice. Due by September 6, 2006 10. OFFICERS AND DIRECTORS TITLE JENNEWEIN, DON NAME STREET ADDRESS 1220 ROXMERE ROAD CITY-ST-ZIF TAMPA, FL 33629 TITLE NAME JENNEWEIN, LESLIE STREET ADDRESS 1220 ROXMERE ROAD CITY-ST-ZIP TAMPA, FL 33629 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZiP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE

12. I hereby certify that the information supplied with this filling 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 ado

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIE