2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000098439

Entity Name: THE PHIRM OF PAMELA LESLIE, INC.

FILED Jun 04, 2009 Secretary of State

Current P	rincipal Place	of Business:	New Prin	New Principal Place of Business:		
	D RIDGE DR W, FL 33569	US		SBORNE FL 33610	US	
Current Mailing Address:			New Mai	New Mailing Address:		
P O BOX 6 BRANDON	6744 N, FL 33508	US				
FEI Number	: 59-3405509	FEI Number Applied For ()	FEI Number Not Ap	plicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name an	Name and Address of New Registered Agent:		
LESLIE, P 4667 POND RIDGE DR RIVERVIEW, FL 33569 US			2107 E. C	LESLIE, P 2107 E. OSBORNE AVE TAMPA, FL 33610 US		
	named entity se of Florida.	submits this statement for the p	urpose of changing	its registered	d office or registered agent, or both,	
SIGNATURE:				06/04/2009		
Electronic Signature of Registered Agent					Date	
Election Car		3(2)(b), F.S., the corporation did no g Trust Fund Contribution ().	-		S TO OFFICERS AND DIRECTOR	
Title: Name: Address: City-St-Zip:	P () LESLIE, P 4667 POND RII RIVERVIEW, FI		Title: Name: Address: City-St-Zip:	LESLIE, P 2107 OSBOI		
Title: Name: Address: City-St-Zip:	VP () LESLIE, M 4667 POND RII RIVERVIEW, FI		Title: Name: Address: City-St-Zip:	LESLIE, M 2107 OSBOI		
Title: Name: Address: City-St-Zip:	T () LESLIE, PAT R 4667 POND RII RIVERVIEW, FI	DGE DR	Title: Name: Address: City-St-Zip:	LESLIE, P 2107 OSBOI	· · · · —	
Title: Name: Address: City-St-Zip:	S () LESLIE, MYRO 2051 KINGS PA RIVERVIEW, FI	LACE DR	Title: Name: Address: City-St-Zip:	THOMAS, Z 1213 E. 15T		
Title: Name: Address: City-St-Zip:	O (X) THOMAS, ZERO 1213 E. 15TH A TAMPA, FL 330	VE	Title: Name: Address: City-St-Zip:		() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: PLESLIE P 06/04/2009