

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 17, 2008 8:00 am
Secretary of State

01-17-2008 90022 007 ***150.00

DOCUMENT # P98000006399 1. Entity Name LEONARD L. LISZEWSKI, P.A.																																	
Principal Place of Business 2110 CLEVELAND AVE. FT. MYERS, FL 33901			Mailing Address 2110 CLEVELAND AVE. FT. MYERS, FL 33901																														
2. Principal Place of Business - No P.O. Box # 1950 Courtney Dr Suite, Apt. #, etc. 205		3. Mailing Address 1950 Courtney Dr Suite, Apt. #, etc. 205																															
City & State Ft. Myers fl		City & State Ft Myers Fl		4. FEI Number 65-0811479																													
Zip 33901		Country Lee		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required																													
6. Name and Address of Current Registered Agent LISZEWSKI, LEONARD L ESQ. 2110 CLEVELAND AVE. FT. MYERS, FL 33901				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 1950 Courtney Dr City 205 City Ft Myers FL Zip Code 33901																													
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, the registered agent. SIGNATURE <i>Leonard L. Liszewski</i> DATE 1-7-08																																	
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees																														
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%;">TITLE NAME STREET ADDRESS CITY-ST-ZIP</td> <td style="width:70%;"> PSTD LISZEWSKI, LEONARD L 2110 CLEVELAND AVE. FT. MYERS, FL 33901 ☐ Delete </td> </tr> <tr><td colspan="2" style="height: 40px;"></td></tr> <tr><td colspan="2" style="height: 40px;"></td></tr> <tr><td colspan="2" style="height: 40px;"></td></tr> <tr><td colspan="2" style="height: 40px;"></td></tr> <tr><td colspan="2" style="height: 40px;"></td></tr> <tr><td colspan="2" style="height: 40px;"></td></tr> </table>			TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD LISZEWSKI, LEONARD L 2110 CLEVELAND AVE. FT. MYERS, FL 33901 ☐ Delete													11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%;">TITLE NAME STREET ADDRESS CITY-ST-ZIP</td> <td style="width:70%;"> PSTD Liszewski Leonard L 1950 Courtney Dr 205 Ft Myers , Fl 33901 ☒ Change ☐ Addition </td> </tr> <tr><td colspan="2" style="height: 40px;"></td></tr> <tr><td colspan="2" style="height: 40px;"></td></tr> <tr><td colspan="2" style="height: 40px;"></td></tr> <tr><td colspan="2" style="height: 40px;"></td></tr> <tr><td colspan="2" style="height: 40px;"></td></tr> <tr><td colspan="2" style="height: 40px;"></td></tr> </table>			TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD Liszewski Leonard L 1950 Courtney Dr 205 Ft Myers , Fl 33901 ☒ Change ☐ Addition												
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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: <i>Leonard L. Liszewski</i> LEONARD L. LISZEWSKI DATE 1-7-08																																	