

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000009110

FILED
Apr 24, 2007
Secretary of State

Entity Name: M & D ENTERPRISES OF LEESBURG, INC.

Current Principal Place of Business:

1406 EMERSON ST.
LEESBURG, FL 34748

New Principal Place of Business:

Current Mailing Address:

1406 EMERSON ST.
LEESBURG, FL 34748

New Mailing Address:

FEI Number: 59-3508795

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NORVELL, MICHAEL C ESQ
LAKE LAW CENTER
1410 EMERSON STREET
LEESBURG, FL 34748 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: LENARD, MEALE R
Address: 1404 EMERSON ST
City-St-Zip: LEESBURG, FL 34748

Title: VP () Delete
Name: DAVIS, SHIRLEY
Address: 1406 EMERSON ST
City-St-Zip: LEESBURG, FL 34748

Title: S () Delete
Name: DAVIS, TERRILL
Address: 1406 EMERSON ST
City-St-Zip: LEESBURG, FL 34748

Title: T () Delete
Name: MEALER, ALICE
Address: 1406 EMERSON ST
City-St-Zip: LEESBURG, FL 34748

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LENARD, MEALER
Address: 1404 EMERSON ST
City-St-Zip: LEESBURG, FL 34748

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 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: LENARD MEALER

P

04/24/2007

Electronic Signature of Signing Officer or Director

_____ Date