

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000009741

FILED  
Apr 26, 2007  
Secretary of State

Entity Name: CONCEALED WEAPON TRAINING INSTITUTE, INC.

## Current Principal Place of Business:

6835 NARCOOSSEE ROAD  
22  
ORLANDO, FL 32822

## New Principal Place of Business:

## Current Mailing Address:

6835 NARCOOSSEE ROAD  
22  
ORLANDO, FL 32822

## New Mailing Address:

FEI Number: 59-3492443

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LEINDECKER, THOMAS  
545 GARFIELD AVE  
303  
COCOA BEACH, FL 32931 US

## Name and Address of New Registered Agent:

LEINDECKER, THOMAS  
19705 SEAVIEW STREET  
ORLANDO, FL, FL 32833 US

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:

04/26/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PO ( ) Delete  
Name: LEINDECKER, THOMAS G  
Address: 545 GARFIELD AVE #303  
City-St-Zip: COCOA BEACH, FL 32931

Title: ST ( ) Delete  
Name: LEINDECKER, PAGE  
Address: 545 GARFIELD AVE #303  
City-St-Zip: COCOA BEACH, FL 32931

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PO (X) Change ( ) Addition  
Name: LEINDECKER, THOMAS G  
Address: 19705 SEAVIEW STREET  
City-St-Zip: ORLANDO, FL 32833

Title: ST (X) Change ( ) Addition  
Name: LEINDECKER, PAGE  
Address: 19705 SEAVIEW STREET  
City-St-Zip: ORLANDO, FL 32833

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: PAGE LEINDECKER

ST

04/26/2007

Electronic Signature of Signing Officer or Director

Date