

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000030665

Entity Name: LEN & TOM'S FLORIDA, INC.

FILED
Apr 27, 2004
Secretary of State

Current Principal Place of Business:

480 BLACKBURN PT RD
OSPREY, FL 34229

New Principal Place of Business:

Current Mailing Address:

480 BLACKBURN PT RD
OSPREY, FL 34229

New Mailing Address:

FEI Number: 65-0831567

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEFEVRE, TOM
480 BLACKBURN POINT RD
OSPREY, FL 34229 US

Name and Address of New Registered Agent:

LEFEVRE, TOM
480 BLACKBURN POINT RD
OSPREY, FL 34229 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: TOM LEFEVRE

04/27/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LEFEVRE, THOMAS J
Address: 1310 OLD STICKNEY PT RD
City-St-Zip: SARASOTA, FL 34242

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LEFEVRE, THOMAS J
Address: 480 BLACKBURN POINT ROAD
City-St-Zip: OSPREY, FL 34229

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: TOM LEFEVRE

P

04/27/2004

Electronic Signature of Signing Officer or Director

Date