2006 FOR PROFIT CORPORATION

FILED **ANNUAL REPORT** Apr 24, 2006 08:00 AN Secretary of State DOCUMENT # P98000036766 1. Entity Name LEGÉAR ENTERPRISES, INC. Principal Place of Business Mailing Address 893 HUB DRIVE 893 HUB DRIVE PANAMA CITY, FL 32401 PANAMA CITY, FL 32401 03012006 No Cha-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3564635 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BAKER, FRANK A DO NOT WRITE 893 HUB DRIVE PANAMA CITY, FL 32401 IN THIS SPACE 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 abligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signatura réquired when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution, Added to Fees After May 1, 2006 Fee will be \$550.00 10. OFFICERS AND DIRECTORS SVTP TITLE LEGEAR, NOAH A MAME STREET ADDRESS 893 HUB DRIVE U00000527340 05/04/06-80109-015 150.00 PANAMA CITY, FL 32401 CITY-ST-ZIP D TITLE GOLDEN, KIMBERLY L NAME STREET ADDRESS 893 HUB DRIVE CITY-ST-7IP PANAMA CITY, FL 32401 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE STREET ADDRESS CITY-ST-ZIP TITLE NAME

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 inclicated 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:

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

