

2005 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P98000069242

1. Entity Name
LEE TUBBS & ASSOCIATES, INC.



Principal Place of Business

620 MORGAN STREET
WINTER SPRINGS, FL 32708

Mailing Address

620 MORGAN STREET
WINTER SPRINGS, FL 32708

FILED

May 06, 2005 08:00 AM
Secretary of State



05032005 No Chg-P CR2E034 (10/03)

4. FEI Number 59-3544565	Applied For Not Applicable
5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

TUBBS, LEVESTER
620 MORGAN STREET
WINTER SPRINGS, FL 32708

**DO NOT WRITE
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 obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
Due by September 7, 2005

9. Election Campaign Financing
Trust Fund Contribution. \$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE P
NAME TUBBS, LEVESTER
STREET ADDRESS 620 MORGAN ST
CITY-ST-ZIP WINTER SPRINGS, FL 32708

TITLE ST
NAME TUBBS, MARY P
STREET ADDRESS 620 MORGAN ST
CITY-ST-ZIP WINTER SPRINGS, FL 32708

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

U000000364267
05/06/05-00035-012 150.00
**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify 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 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: *Levester J. Tubbs* LeVester Tubbs

5-4-05

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #