

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000100586

FILED  
Apr 17, 2011  
Secretary of State

Entity Name: LEITCH OF NORTH FLORIDA, INC.

## Current Principal Place of Business:

4458 COBBLEFIELD CIR.W.  
JACKSONVILLE, FL 32224

## New Principal Place of Business:

14387 MARSH HAMMOCK DR. S.  
JACKSONVILLE, FL 32224

## Current Mailing Address:

4458 COBBLEFIELD CIR.W.  
JACKSONVILLE, FL 32224

## New Mailing Address:

14387 MARSH HAMMOCK DR. S.  
JACKSONVILLE, FL 32224

FEI Number: 59-3609449

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LEITCH, KATHERINE D  
4458 COBBLEFIELD CIR.W.  
JACKSONVILLE, FL 32224 US

## Name and Address of New Registered Agent:

LEITCH, KATHERINE D  
14387 MARSH HAMMOCK DR.S.  
JACKSONVILLE, FL 32224 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: KATHERINE D LEITCH

04/17/2011

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PSD  
Name: LEITCH, KATHERINE D  
Address: 14387 MARSH HAMMOCK DR. S.  
City-St-Zip: JACKSONVILLE, FL 32224

Title: VT  
Name: LEITCH, ERIC J  
Address: 14387 MARSH HAMMOCK DR. S.  
City-St-Zip: JACKSONVILLE, FL 32224

I hereby 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 all other like empowered.

SIGNATURE: KATHERINE D LEITCH

PSD

04/17/2011

Electronic Signature of Signing Officer or Director

Date