## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S17129

Entity Name: OUTDOOR LEISURE ENTERPRISES, INC.

FILED Mar 04, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

12900 TRAILS END RD 12900 E. TRAILS END RD FLORAL CITY, FL 34436 US FLORAL CITY, FL 34436 US

Current Mailing Address: New Mailing Address:

12900 TRAILS END RD FLORAL CITY, FL 34436 US 12900 E. TRAILS END RD FLORAL CITY, FL 34436 US

FEI Number: 59-3038963 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

VINCENT, DAVE

12900 TRAILS END RD

FLORAL CITY, FL 34436 US

VINCENT, DAVID

12900 E. TRAILS END RD

FLORAL CITY, FL 34436 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: DAVID VINCENT 03/04/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

( ) Delete

## **OFFICERS AND DIRECTORS:**

Title:

Name:

Title: DP (X) Change ( ) Addition

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

VINCENT, DAVE, Name: VINCENT, DAVID

 Address:
 12900 TRAILS END RD
 Address:
 12900 E. TRAILS END RD

 City-St-Zip:
 FLORAL CITY, FL
 City-St-Zip:
 FLORAL CITY, FL
 34436

Title: DVP ( ) Delete Title: DVP (X) Change ( ) Addition

Name:VINCENT, KATHERINEName:VINCENT, KATHERINEAddress:12900 TRAILS END RDAddress:12900 E. TRAILS END RDCity-St-Zip:FLORAL CITY, FLCity-St-Zip:FLORAL CITY, FL34436

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: DAVID VINCENT P 03/04/2009