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95 APR 24 AM 10:13

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DO NOT WRITE IN THIS SPACE.

CORPORATION ANNUAL REPORT 1995		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # S92665 (6)

1. Corporation Name
LEELCO, INC.

Principal Place of Business 7440 MERRILL ROAD SUITE B JACKSONVILLE FL 32277 US	Mailing Address 7440 MERRILL ROAD SUITE B JACKSONVILLE FL 32277 US
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3. Date Incorporated or Qualified 11/06/1991	3a. Date of Last Report 06/24/1994
4. FEI Number 59-3091193	Applied For <input type="checkbox"/> Applied For <input checked="" type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
6. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21 10360 Beach Blvd.	2a. Mailing Address 26 PO. Box 11508
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22	27
City & State 23 Jacksonville, FL	City & State 28 Jacksonville, FL
Zip 24 32246 Country 25 USA	Zip 29 32239 Country 30 USA

9. Name and Address of Current Registered Agent

**LUTHER, BAXTER E.
7440 MERRILL RD., #B
JACKSONVILLE FL 32277**

10. Name and Address of New Registered Agent

81 Name Luther, Baxter E.
82 Street Address (P.O. Box Number is Not Acceptable)
83 10360 Beach Blvd.
84 City Jacksonville FL 85 Zip Code 32246

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: *[Signature]* DATE: _____
(Signature typed or printed name of registered agent and title if applicable. NOTE: Registered Agent signature required when reappointing)

12. OFFICERS AND DIRECTORS

TITLE P	NAME LUTHER, BAXTER E.
STREET ADDRESS 7440 MERRILL ROAD-	
CITY - ST - ZIP JACKSONVILLE FL	
TITLE	NAME
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	NAME
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	NAME
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	NAME
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME 8209 Ft. Caroline Rd.
13 STREET ADDRESS Jacksonville, FL
14 CITY - ST - ZIP 32277
21 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME
23 STREET ADDRESS
24 CITY - ST - ZIP
31 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME
33 STREET ADDRESS
34 CITY - ST - ZIP
41 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME
43 STREET ADDRESS
44 CITY - ST - ZIP
51 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME
53 STREET ADDRESS
54 CITY - ST - ZIP
61 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME
63 STREET ADDRESS
64 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *[Signature]* DATE: _____
(Signature typed or printed name of signing officer or director)