

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V27793

Entity Name: LEE REE, INC.

FILED
May 03, 2004
Secretary of State

Current Principal Place of Business:

2 MARKET PLACE
SUITE D
PALM COAST, FL 32137

New Principal Place of Business:

Current Mailing Address:

2 MARKET PLACE
SUITE D
PALM COAST, FL 32137

New Mailing Address:

FEI Number: 59-3113157

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SKLADZIEN, RICHARD
2 MARKET PLACE
UNIT D
PALM COAST, FL 32137 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SKLADZIEN, RICHARD
Address: 123 COCHISE CT
City-St-Zip: PALM COAST, FL 32137

Title: V () Delete
Name: RYBSKI, LESZEK
Address: 27 CENTERY LN
City-St-Zip: PALM COAST, FL 32137

Title: TS () Delete
Name: SKLADZIEN REELEY, JOANNA
Address: P.O. BOX 351111 N/A
City-St-Zip: PALM COAST, FL 32135

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: V (X) Change () Addition
Name: RYBSKI, LESZEK
Address: 11 VERANDA WAY
City-St-Zip: PALM COAST, FL 32137

Title: TS (X) Change () Addition
Name: SKLADZIEN REELEY, JOANNA
Address: 123 COCHISE CT
City-St-Zip: PALM COAST, FL 32137

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JOANNA S REELEY

MS.

05/03/2004

Electronic Signature of Signing Officer or Director

Date