

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K15136

Entity Name: M & G LEASING CO.

FILED  
Jan 19, 2010  
Secretary of State

**Current Principal Place of Business:**

499 N ST RD 434  
STE 2179  
ALTAMONTE SPRINGS, FL 32714 US

**New Principal Place of Business:**

**Current Mailing Address:**

499 N STATE RD 434  
STE 2179  
ALTAMONTE SPRINGS, FL 32714 US

**New Mailing Address:**

FEI Number: 59-2872449      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

HOLLINGSWORTH II, GEORGE R II  
499 N STATE RD 434  
SUITE 2179  
ALTAMONTE SPRINGS, FL 32714 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DST  
Name: HOLLINGSWORTH, GEORGE R II  
Address: 499 N STATE RD 434 STE. 2179  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: DP  
Name: MOORE, BARBARA J  
Address: 499 N STATE RD 434 STE. 2179  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: DV  
Name: GARNER, JOHN M  
Address: 499 N. STATE RD 434 STE. 2179  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

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: GEORGE R. HOLLINGSWORTH, II

SEC

01/19/2010

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date