**2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)** 

SIGNATURE: Shadie

DOCUMENT # 412100  1. Entity Name THORNTON LEASING, INC.					Feb 04, 2004 08:00 AM  Secretary of State			
Principal Place	of Business	Mailing Address		-				
405-8TH AVENUE WEST		405-8TH AVENUE WEST						
PALMETTO F		PALMETTO FL 34221						
2. Principal Place of Business		3. Mailing Address						
					iali alali alali alal			
Suite, Apt. #, etc		Suite, Apt #, etc		MOORE	CR2E034 (	11/03)	=	
City & State		City & State		4. FEI Number 59-1423149		Αp	plied For	
		2.			39-1423149			t Applicable
<b>Ζ</b> ιρ	Country	Zip	Coun	itry	5. Certificate of Status Desired		<b>8.75</b> Add se Requirer	
	6. Name and Address of Curren	t Registered Agent	1		7. Name and Address of New Re		,	
Name						• •		-
	RNTON, GRADIE BTH AVENUE	Stree		Street Address (	P.O. Box Number is Not Acceptable	}		
PALN			ļ					
				City		FL	Zip Code	9
		for the purpose of changing its	registere	ed office or register	red agent, or both, in the State of Flo	nda. Łam fai	niliar with,	and accept
the obligation	ons of registered agent.							
SIGNATURE _	lignaturo typed or printed name of registered agoi	or and tills if another the MICE	T Occupion	d Agent signature required	d when constation	DATE		
	<del></del>	wand due is approache (NO)	C Liedizidas	a wiles to still section and an extension	v when remainings	DATE		
After	LE NOW!!! FEE IS \$150.00 May 1, 2004 Fee will be \$550.00 Payable to Florida Department				9. Election Campaign Fin Trust Fund Contribution			May Be to Fees
10.	OFFICERS ANI	O DIRECTORS	11.		ADDITIONS/CHANGES TO OFFE	CERS AND D	RECTOR	SIN 11
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}	THORNTON, R GRADIE 4711 13TH ST W		RAM	ET ADDRESS	.90000003 02/0 <b>5</b> /04-80	3145	100 0	n
<b>§</b> 1	PALMETTO, FLA 0			-ST-ZIP	027037U4-6U	721-012	120.0	ម
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3	THORNTON, TERESA J		NAM	E E			_ •	_
} }	408 8TH AVENUE			ET ADORESS				
}	PALMETTO, FLA 0			-ST-ZIP			T Channa	C Addition
}	SD THORNTON, ANITA	☐ Delete	TITLI NAM	1		<b>(</b>	Change	Addition
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12. Thereby co	ertify that the information supplied wi on this report or supplemental report	th this filing does not qualify to is true and accurate and that	or the exe my signa	emption stated in Se sture shall have the	ection 119.07(3)(i), Florida Statutes, i same legal effect as if made under o	further certif	y that the in an officer	nformation or director
of the corp	oration or the receiver or trustee em or on an attachment with an address	powered to execute this report i, with all other like empowered	t as requi t.	ired by Chapter 60	7, Florida Statutes; and that my name	appears in	Block 10 o	r Block 11 if
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**FILED**