

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N10000001377

**Entity Name:** OSCEOLA COUNTY SCHOOL BOARD LEASING CORPORATION**Current Principal Place of Business:**817 BILL BECK BOULEVARD  
KISSIMMEE, FL 34744**Current Mailing Address:**817 BILL BECK BOULEVARD  
KISSIMMEE, FL 34744**FEI Number:** 80-0550510**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GRABER, SARAH  
817 BILL BECK BOULEVARD  
KISSIMMEE, FL 34744 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:** SARAH GRABER

02/06/2018

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR, VP  
Name THACKER, CLARENCE  
Address 817 BILL BECK BOULEVARD  
City-State-Zip: KISSIMMEE FL 34744

Title SECRETARY  
Name PACE, DEBRA DR.  
Address 817 BILL BECK BOULEVARD  
City-State-Zip: KISSIMMEE FL 34744

Title DIRECTOR  
Name WEISHEYER, TIM  
Address 817 BILL BECK BOULEVARD  
City-State-Zip: KISSIMMEE FL 34744

Title DIRECTOR  
Name SOTO, KELVIN  
Address 817 BILL BECK BOULEVARD  
City-State-Zip: KISSIMMEE FL 34744

Title DIRECTOR  
Name WHEELER, JAY  
Address 817 BILL BECK BOULEVARD  
City-State-Zip: KISSIMMEE FL 34744

Title DIRECTOR, PRESIDENT  
Name BOOTH, RICKY  
Address 817 BILL BECK BOULEVARD  
City-State-Zip: KISSIMMEE FL 34744

Title TREASURER  
Name GRABER, SARAH  
Address 817 BILL BECK BLVD  
City-State-Zip: KISSIMMEE FL 34744

*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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** RICKY BOOTH

DIRECTOR, PRESIDENT

02/06/2018

Electronic Signature of Signing Officer/Director Detail

Date