## 2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000001398

Entity Name: ST. JOHNS COUNTY SCHOOL BOARD LEASING

CORPORATION

**Current Principal Place of Business:** 

40 ORANGE ST.

ST. AUGUSTINE, FL 32084

**Current Mailing Address:** 

40 ORANGE ST.

ST. AUGUSTINE, FL 32084

FEI Number: 59-6000824 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

FORSON, TIM 40 ORANGE ST.

ST. AUGUSTINE, FL 32084 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: TIM FORSON 01/31/2024

> Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title Title DIRECTOR

Name COLEMAN, ANTHONY Name COLLINS, JENNIFER Address 40 ORANGE STREET Address 40 ORANGE ST. City-State-Zip: ST. AUGUSTINE FL 32084 City-State-Zip: ST. AUGUSTINE FL

Title **DIRECTOR** Title S/T

CANAN, PATRICK Name FORSON, TIM Name Address 40 ORANGE ST. Address 40 ORANGE STREET

City-State-Zip: SAINT AUGUSTINE FL 32084 City-State-Zip: SAINT AUGUSTINE FL 32084

Title **DIRECTOR** Title **PRESIDENT** 

Name BARRERA, KELLY Name SLOUGH, BEV Address 40 ORANGE STREET 40 ORANGE STREET Address

City-State-Zip: ST. AUGUSTINE FL 32084 ST. AUGUSTINE FL 32084 City-State-Zip:

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: BEV SLOUGH **PRESIDENT** 

Electronic Signature of Signing Officer/Director Detail

01/31/2024

**FILED** Jan 31, 2024

**Secretary of State** 

6730084005CC

Date