

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 218853

FILED  
Mar 29, 2006  
Secretary of State

Entity Name: PASCO CAR LEASING INC

**Current Principal Place of Business:**

14341 7TH STREET  
DADE CITY, FL 33523 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 67  
DADE CITY, FL 335260067 US

**New Mailing Address:**

FEI Number: 59-0999998

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

NEWSOME, BARNEY R  
14341 7TH STR  
DADE CITY, FL 33523 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: PD ( ) Delete  
Name: NEWSOME, BARNEY R  
Address: 14341 7TH STREET  
City-St-Zip: DADE CITY, FL 33523 US

Title: SD ( ) Delete  
Name: MUDGE, SUE  
Address: 5223 HIGHGATE CT  
City-St-Zip: ZEPHYRHILLS, FL 33541

Title: DT ( ) Delete  
Name: HAUFF, LEROY D  
Address: 13436 14TH STREET  
City-St-Zip: DADE CITY, FL 33525

Title: V ( ) Delete  
Name: NEWSOME, PATRICIA C  
Address: 14341 7TH STREET  
City-St-Zip: DADE CITY, FL 33523 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: SUE MUDGE

SD

03/29/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date