

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morton
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAR -7 PM 3:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 542293

(6)

1. Corporation Name

MARY ESTHER LEASING, INC.

Principal Place of Business

116 POINT COMFORT RD.
MARY ESTHER FL 32659-9040

Mailing Address

116 POINT COMFORT RD.
MARY ESTHER FL 32659-9040

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

08/01/1977

3a. Date of Last Report

02/08/1994

4. FEI Number

59-1762003

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

2a. Mailing Address

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 25

29 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PRYOR, ERIC ROGER
116 POINT COMFORT RD.
MARY ESTHER FL 32659-9040

81 Name
Pryor, Frederick L.

82 Street Address (P.O. Box Number is Not Acceptable)
621 Miracle Strip Parkway

83

84 City
Mary Esther

FL

85 Zip Code
32569

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

FREDERICK L. Pryor

[Signature]

Jul 27, 1995

Signature, typed or printed name of registered agent and title, if applicable.

Signature, typed or printed name of new registered agent and title, if applicable.

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11E PD
NAME PRYOR, ERIC ROGER
STREET ADDRESS 116 POINT COMFORT RD.
CITY-ST-ZIP MARY ESTHER FL

1.1 TITLE President ☒ Change ☐ Addition
1.2 NAME Pryor, Frederick L.
1.3 STREET ADDRESS 621 W. Miracle Strip Parkway
1.4 CITY-ST-ZIP Mary Esther, FL 32569

11F STD
NAME PRYOR, MARYELIZABETH
STREET ADDRESS 621 MIRACLE STRIP PKWY
CITY-ST-ZIP MARY ESTHER FL

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

11G VD
NAME PRYOR, FREDERICK L.
STREET ADDRESS 621 W. MIRACLE STRIP PKY
CITY-ST-ZIP MARY ESTHER FL

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

11H D
NAME PRYOR, MARY E.
STREET ADDRESS 116 POINT COMFORT RD.
CITY-ST-ZIP MARY ESTHER FL

4.1 TITLE Vice President ☒ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

11I
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

11J
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13, if changed, or on an attached sheet with an address.

SIGNATURE:

[Signature]

FREDERICK L. Pryor

2/11/95

904-243-4907

Signature and typed or printed name of signing officer or director

Date

Telephone Area &