FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED PROFIT Mar 10 1998 8:00am ELORIDA DEPARTMENT DE STATE **CORPORATION** Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # 578261 (0)LAKELAND LEASING CORP. Principal Place of Business Mailing Address 540 BRACEY ROAD 540 BRACEY ROAD LAKELAND FL 33809-8529 LAKELAND FL 33809-8529 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/01/1978 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For Not Applicable 59-1841795 21 26 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Added to Fees Trust Fund Contribution 23 Country Zip 8. This corporation owes or has paid the current year Intangible Zip Country Yes Personal Property Tax due June 30. 24 25 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name 81 van **Sic**kle, Julian e 540 BRACEY ROAD Street Address (P.O. Box Number is Not Acceptable) **LAKELAND FL 33809** 83 84 City Zip Code 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. ☐ DELETE Change Addition 1.1 TIFLE TITLE VAN SICKLE, JULIAN E. 1.2 NAME NAME **540 BRACEY ROAD** 1.3 STREET ADDRESS STREET ADDRESS LAKELAND, FL 33803 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 2.1 TITLE TITLE VAN SICKLE, JULIAN E. 2.2 NAME NAME **540 BRACEY ROAD** 2.3 STREET ADDRESS STREET ADDRESS LAKELAND, FL 33803 2.4 CITY - ST - ZIP CITY-ST-ZIP DELETE ☐ Change Addition 3.1 TITLE TITLE CARROLL, DEANNA 3.2 NAME NAME 10030 ROCKRIDGE RD. 3.3 STREET ADDRESS STREET ADDRESS LAKELAND FL 3.4. CITY - ST - ZIP CITY-ST-ZIP ☐ Addition Change DELETE 4.1 TITLE TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition 5.1 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP DELET**E** 6.1 TITLE Change ■ Addition TITLE

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 ghanged, or on an attachment with an address.

6.2 NAME

6.3 STREET ADDRESS

eletion I Van Sinkla

NAME

STREET ADDRESS CITY-ST-ZIP

941-253-1669