

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G59901

FILED
Jul 16, 2004
Secretary of State

Entity Name: MOORE RENTAL AND LEASING, INC.

Current Principal Place of Business:

3030 HWY 27N
DAVENPORT, FL 33837 US

New Principal Place of Business:

Current Mailing Address:

C/O RONALD R. MOORE
P.O. BOX 1566
HAINES CITY, FL 33845 US

New Mailing Address:

FEI Number: 59-2323735 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOORE, RONALD R.
US HWY 27 NORTH
P. O. BOX 1566
HAINES CITY, FL 33845 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: PTD () Delete
Name: MOORE, RONALD R.,
Address: US HWY 27 NORTH
City-St-Zip: HAINES CITY, FL

Title: VD () Delete
Name: MOORE, MICHAEL N.,
Address: US HWY 27 NORTH
City-St-Zip: HAINES CITY, FL

Title: T () Delete
Name: MOORE, MARY LOU (ASS, T)
Address: US HWY 27 NORTH
City-St-Zip: HAINES CITY, FL

Title: S () Delete
Name: MOORE, MARY LOU,
Address: US HWY 27 NORTH
City-St-Zip: HAINES CITY, FL 00000,

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 Section 119.07(3)(i), 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: RONALD R MOORE

PTD

07/16/2004

Electronic Signature of Signing Officer or Director

_____ Date