

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H85495

FILED
Apr 15, 2011
Secretary of State

Entity Name: WALPOLE LEASING CORPORATION

Current Principal Place of Business:

269 NW 9TH STREET
OKEECHOBEE, FL 34972

New Principal Place of Business:

Current Mailing Address:

P O BOX 1177
OKEECHOBEE, FL 34973

New Mailing Address:

FEI Number: 59-2602516

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALPOLE, KEITH A
269 N W 9TH STREET
SUITE 200E
OKEECHOBEE, FL 34972 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

OFFICERS AND DIRECTORS:

Title: P
Name: WALPOLE, E.E.,IV
Address: 1100 PINELLAS BAYWAY APT. L2
City-St-Zip: TIERRE VERDE, FL 33715

Title: VP
Name: WALPOLE, E. E. III
Address: 269 NW 9TH ST
City-St-Zip: OKEECHOBEE, FL

Title: STD
Name: WALPOLE, KEITH A.
Address: 269 NW 9TH ST
City-St-Zip: OKEECHOBEE, FL 34972

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: EDWIN E WALPOLE III

VP

04/15/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date