2007 FOR PROFIT CORPORATION ANNUAL REPORT

ANNUAL REPORT DOCUMENT # M73790

1. Entity Name
WASHCO LEASING, INC.



Principal Place of Business

Mailing Address

3939 PALM BEACH BLVD. FT. MYERS, FL 33916-0729 3939 PALM BEACH BLVD. FT. MYERS, FL 33916-0729

FILED Mar 09, 2007 08:00 A Secretary of State



DO NOT WRITE IN THIS SPACE

01092007 No Chg-P CR2E034 (11/05)

4. FEI Number Applied For Not Applicable

5. Certificate of Status Desired ____

March 9, 2007

239-694-4102

Daytime Phone #

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HOLBROOK, H. LEON 2301 INDEPENDENT SQ. ONE INDEPENDENT DR. JACKSONVILLE, FL 32202

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE					
Signature, typed or printed name of registered agent and site if applicable (NOTE, Registered Agent signature required when renstating) DATE					
FILE NOWIII FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Finance Trust Fund Contribution.			icing	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	CTORS			
TITLE NAME STREET ADDRESS CITY: ST-ZIP	D MITCHELL, CRAIG C. 3939 PALM BEACH BLVD. FT. MYERS, FL				
TITLE NAME STREET ADDRESS CITY-ST-ZIP					ມ00000661011 03/20/07–80024–003 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					