2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000004360

FILED Feb 05, 2008 Secretary of State

Entity Name: HIGHLANDS COUNTY SCHOOL BOARD LEASING CORPORATION

Current Principal Place of Business: New Principal Place of Business: 426 SCHOOL STREET SEBRING, FL 33870 **Current Mailing Address: New Mailing Address:** 426 SCHOOL STREET SEBRING, FL 33870 FEI Number: 59-3759805 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: COX, WALLY 426 SCHOOL STREET SEBRING, FL 33870 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition HANCOCK, NED J HANCOCK, NED J Name: Name: 426 SCHOOL STREET Address: 426 SCHOOL STREET Address: City-St-Zip: SEBRING, FL 33870 City-St-Zip: SEBRING, FL 33870 Title: Title: () Delete () Change () Addition RANDALL, WALLY Name: Name: Address: 426 SCHOOL STREET Address: City-St-Zip: SEBRING, FL 33870 City-St-Zip: Title: () Delete Title: () Change () Addition NORRIS, RICHARD Name: Name: 426 SCHOOL STREET Address: Address: City-St-Zip: SEBRING, FL 33870 City-St-Zip: Title: PD () Delete Title: (X) Change () Addition Name: HOWERTON, DONNA Name: HOWERTON, DONNA 426 SCHOOL STREET 426 SCHOOL STREET Address: Address: City-St-Zip: SEBRING, FL 33870 City-St-Zip: SEBRING, FL 33870 Title: () Delete Title: VD (X) Change () Addition TUCK, RICHARD TUCK, RICHARD Name: Name: 426 SCHOOL STREET 426 SCHOOL STREET Address: Address: City-St-Zip: SEBRING, FL 33870 City-St-Zip: SEBRING, FL 33870 Title: () Delete Title: () Change () Addition SCOBEY, CONNIE Name: Name: Address: 426 SCHOOL STREET Address: SEBRING, FL 33870 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NED HANCOCK PD 02/05/2008