

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000002029

FILED
Jul 11, 2006
Secretary of State

Entity Name: PASCO COUNTY SCHOOL BOARD LEASING CORPORATION

Current Principal Place of Business:

7227 LAND O' LAKES BLVD
LAND O' LAKES, FL 34638

New Principal Place of Business:

Current Mailing Address:

7227 LAND O' LAKES BLVD
LAND O' LAKES, FL 34638

New Mailing Address:

FEI Number: 20-3719003 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

FIORENTINO, HEATHER
7227 LAND O' LAKES BLVD
LAND O' LAKES, FL 34638 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: MRS. () Delete
Name: WEIGHTMAN, JEAN LARKIN
Address: 7227 LAND O' LAKES BLVD
City-St-Zip: LAND O' LAKES, FL 34638

Title: MRS. () Delete
Name: WHALEY, MARGE
Address: 7227 LAND O' LAKES BLVD
City-St-Zip: LAND O' LAKES, FL 34638

Title: MRS. () Delete
Name: MARTIN, CATHI
Address: 7227 LAND O' LAKES BLVD
City-St-Zip: LAND O' LAKES, FL 34639

Title: MRS. () Delete
Name: STARKEY, KATHRYN
Address: 7227 LAND O' LAKES BLVD
City-St-Zip: LAND O' LAKES, FL 34638

Title: MRS. () Delete
Name: WOLF, KATHLEEN
Address: 7227 LAND O' LAKES BLVD
City-St-Zip: LAND O' LAKES, FL 34638

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MRS. (X) Change () Addition
Name: MARTIN, CATHI
Address: 7227 LAND O' LAKES BLVD
City-St-Zip: LAND O' LAKES, FL 34638

Title: MRS. (X) Change () Addition
Name: WEIGHTMAN-LARKIN, JEAN
Address: 7227 LAND O' LAKES BLVD
City-St-Zip: LAND O' LAKES, FL 34638

Title: MRS. (X) Change () Addition
Name: WHALEY, MARGE
Address: 7227 LAND O' LAKES BLVD
City-St-Zip: LAND O' LAKES, FL 34638

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 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: OLGA SWINSON

Electronic Signature of Signing Officer or Director

MRS

07/11/2006

Date