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2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

SIGNATURE AND TYPED OR PRINTED HAME OF SIGNING OFFICE OR DIRECTOR

DOCUMENT # N38041

1. Entity Name
SUMTER COUNTY SCHOOL BOARD LEASING CORPORATION



FILED Feb 03, 2004 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

2680 WC-476

BUSHNELL, FL 33513 US

2680 WC-476

BUSHNELL, FL 33513 US



01082004 No Chg-NP

CR2E037 (10/03)

4. FEI Number 59-3015146

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SHIRLEY, RICHARD A 2680 WC 476 BUSHNELL, FL 33513

SIGNATURE:

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 title If applicable (NOTE, Registered Agent signature required when reinstation				required when reinstating)	DATE
	Filing Fee is \$61.25 Due by May 1, 2004	Election Campaign Financ Trust Fund Contribution.	sing	\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JONES, KENNETH P 2680 WC 476 BUSHNELL, FL 33513			1000000028124 3344/24 72814 007 Ct 25	
TITLE MAME STREET ADDRESS CITY-ST-ZIP	D WINCHESTER, LINDA L 2680 WC 476 BUSHNELL, FL		- 02/04/04-99014-007 61.25		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FOOTE, MICHAEL T 2680 WC 476 BUSHNELL, FL			DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NORRIS, CHRISTINE 2680 WC 476 BUSHNELL, FL		IN THIS SPACE		
TITLE NAME STREET ADDRESS CHY-ST-ZIP	D YEST, JANET S 2680 SE 476 BUSHNELL, FL				
TITLE NAME STREET ADDRESS CHY-ST-ZIP	D SHIRLEY, RICHARD A 2680 WC 476 BUSHNELL, FL 33513				
12. I hereby certify that the information supplied with this filing does not qualify 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 signature shall have the same legal effect as if made under cath; 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					