## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## FILED Jan 18, 2007 8:00 am Secretary of State

							•		
1. Entity Nam	COUNTY SCHOOL BOAR	D LEASING			744	01-18-200	07 90090 0	10 ****61	.25
Principal Place 2680 WC-470 BUSHNELL, F	6	Mailing Address 2680 WC-476 BUSHNELL, FL 33513	US			. : Miri 13111 Ağırı 8111	BI AIDA DACH CADII GI	en sien pien sip	WED <b>a</b> t 1880
2. Principal Place of Business - No P.O. Box #		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			01032007	Chg-NP	CR2E0	37 (12/06)	
City & State	e	City & State			4. FEI Number 59-3015				oplied For ot Applicable
Zip	Country	Zip	Country		5. Certificate of	f Status Desire	ed 🔲	\$8.75 Add	
	6. Name and Address of Current	Registered Agent			7. Name and /	ddress of Ne	w Registered	Agent	
SHIRLEY, RICHARD A			Name						
2680 WC 4			Street A	Address (	P.O. Box Number	is Not Accept	table)		
								1 = 2	
			City				Fl	Zip Cod	е
	named entity submits this statement for ions of registered agent.	or the purpose of changing its re	egistered office o	r register	ed agent, or both	, in the State o	of Florida. I am	familiar with,	and accept
SIGNATURE.	Signature, typed or printed name of registered agent	and trie if applicable. (NOTE:	Registered Agent signs	ture required	when reinstating)		DATE		<del></del>
SIGNATURE .	Signature, typed or printed name of registered agent Filling Fee is \$61.25 Due by May 1, 2007	and trie if applicable. (NOTE:  9. Election Camp Trust Fund Co	paign Financing	ture required	\$5.00 May Be Added to Fees		14	k payable t	
SIGNATURE .	Filing Fee is \$61.25	9. Election Camp Trust Fund Co	paign Financing		\$5.00 May Be		Make chec Florida Depa	rtment of S	tate
	Filing Fee is \$61.25 Due by May 1, 2007	9. Election Camp Trust Fund Co	paign Financing entribution.	D EVA 268	\$5.00 May Be	NGES TO OFF	Make chec Florida Depa	rtment of S	tate
10. TITLE NAME STREET ADDRESS	Filing Fee is \$61.25 Due by May 1, 2007  OFFICERS AND DI  D  JONES, KENNETH P  2680 WC 476	9. Election Camp Trust Fund Co	paign Financing ontribution.  11.  TITLE NAME STREET ADDRESS	D EVA 268	\$5.00 May Be Added to Fees ADDITIONS/CHAINS, HAYDIO WC 476	NGES TO OFF	Make chec Florida Depa	rtment of S	tate I 10
10.  TITLE  MAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS	Filing Fee is \$61.25 Due by May 1, 2007  OFFICERS AND DID  JONES, KENNETH P 2680 WC 476  BUSHNELL, FL 33513  D WINCHESTER, LINDA L 2680 WC 476	9. Election Camp Trust Fund Co	Daign Financing Intribution.  11.  ITILE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS	D EVA 268	\$5.00 May Be Added to Fees ADDITIONS/CHAINS, HAYDIO WC 476	NGES TO OFF	Make chec Florida Depa	rtment of Si	tate  V 10  Addition
10.  TITLE MAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Filing Fee is \$61.25 Due by May 1, 2007  OFFICERS AND DID  JONES, KENNETH P 2680 WC 476 BUSHNELL, FL 33513 D WINCHESTER, LINDA L 2680 WC 476 BUSHNELL, FL D FOOTE, MICHAEL T 2680 WC 476	9. Election Camp Trust Fund Co  RECTORS  Delete	Daign Financing ontribution.  11.  TITLE NAME STREET ADDRESS CITY - ST - ZIP  TITLE NAME STREET ADDRESS CITY - ST - ZIP  TITLE NAME STREET ADDRESS CITY - ST - ZIP  TITLE NAME STREET ADDRESS STREET ADDRESS	D EVA 268	\$5.00 May Be Added to Fees ADDITIONS/CHAINS, HAYDIO WC 476	NGES TO OFF	Make chec Florida Depa	IRECTORS IN Change Change	Addition
10.  TITLE MAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Filing Fee is \$61.25 Due by May 1, 2007  OFFICERS AND DID  JONES, KENNETH P 2680 WC 476 BUSHNELL, FL 33513  D WINCHESTER, LINDA L 2680 WC 476 BUSHNELL, FL  D FOOTE, MICHAEL T 2680 WC 476 BUSHNELL, FL  D NORRIS, CHRISTINE 2680 WC 476	9. Election Camp Trust Fund Co  RECTORS  Delete  Delete	Daign Financing ontribution.  11.  11-  11-  11-  11-  11-  11-  1	D EVA 268	\$5.00 May Be Added to Fees ADDITIONS/CHAINS, HAYDIO WC 476	NGES TO OFF	Make chec Florida Depa	Change   Change	Addition

12. I hereby certify that the information supplied with this filing 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 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.

SIGNATURE:

RICHARD A. SHIRLEY 1/4/07 352-793-2315

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNANG OFFICER OR DIRECTOR

Date

Degrate Phone (