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FILE NOW: FILING FEE IS \$61.25

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Feb 17 1997 8:00am  
Secretary of State

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **N41073** (0)  
1. Corporation Name  
**ORANGE COUNTY GOVERNMENTAL LEASING CORPORATION**

Principal Place of Business Mailing Address  
**ORANGE COUNTY ATTORNEY, 201 S ROSALIND  
ORLANDO FL 32801  
US** **%JEAN BENNETT  
ORANGE COUNTY ATTORNEY, 201 S. ROSALIND  
ORLANDO FL 32801  
US**

3. Date Incorporated or Qualified **12/04/1990** 3a. Date of Last Report **04/22/1996**

2. Principal Place of Business 2a. Mailing Address 4. FEI Number **59-3094595** Applied For  
**21** Suite, Apt. #, etc. **26** Suite, Apt. #, etc. Not Applicable

**22** City & State **27** City & State 5. Certificate of Status Desired ☐ **\$8.75 Additional  
Fee Required**

**23** Zip **28** Zip **29** Country **30** Country 6. Election Campaign Financing  
Trust Fund Contribution ☐ **\$5.00 May Be  
Added to Fees**

**24** **25** **29** **30** 8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

**BENNETT, JEAN  
201 S ROSALIND AVE  
ORLANDO FL 32801**

10. Name and Address of New Registered Agent

**81** Name  
**82** Street Address (P.O. Box Number is Not Acceptable)  
**83**  
**84** City **FL** **85** Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP
DCP	CHAPIN, LINDA W.	201 S. ROSALIND	ORLANDO FL				
DV	DONEGAN, WILLIAM E.	201 S. ROSALIND	ORLANDO FL				
ST	BENNETT, JEAN	201 S. ROSALIND	ORLANDO FL				
D	BUTLER, MABLE	201 S. ROSALIND	ORLANDO FL				
D	FREEMAN, BOB	201 S. ROSALIND	ORLANDO FL				
D	JOHNSON, MARY	201 S. ROSALIND	ORLANDO FL				

2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY-ST-ZIP
DV	Tom Staley	201 S. ROSALIND	ORLANDO FL 32801

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *[Signature]* **REQUIRED** **1/13/97**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # **0077856**

CR2E037 (9/96)