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NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

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Daylime Phone # 0065609

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

SIGNATURE:

N50079

(5)

MARION COUNTY SCHOOL BOARD LEASING CORPORATION

512 SOUTHEAST THIRD STREET OCALA FL 34470 3. Date Incorporated or Qualified 07/28/1992 3. Date Incorporated or Qualified 07/28/1992 3. Date Incorporated or Qualified 07/28/1992 4. FEI Number 59-3185728 Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required City & State City & State City & State City & State Country Country Country S12 SOUTHEAST THIRD STREET OCALA FL 34471-2212 3. Date Incorporated or Qualified 07/28/1992 4. FEI Number 59-3185728 Not Applied For Not Applicable Sa.75 Additional Fee Required Fee Required City & State City & State S2 Country S3. Date Incorporated or Qualified 07/28/1992 Applied For Not Applicable Sa.75 Additional Fee Required City & State S3. Date Incorporated or Qualified O7/28/1992 Applied For Not Applicable Fee Required City & State S3. Certificate of Status Desired Fee Required Trust Fund Contribution Added to Fees Added to Fees	Principal Place of Business Mailing Address										
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Suite, Apt #, etc 27 Suite, Apt #, etc 27 Country 27 Country 28 City & State C	2. Principal Pi	face of Business	2a. Mailing	Address				·L			
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Section Sections	¬ '	e	·	iale			1				
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SMITH, JOHN D 512 SOUTHEAST THIRD STREET OCALA FL 34470 82 Street Address (P.O. Box Number is Not Acceptable) 63 64 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 617,0502 and 617,1508. Florida Statutes, the above-hamed corporations submits this statement for the purpose of changing its registered office or registriced agent, or both, in pire State of Florida, Subuch change were authorized by the corporation's board of directors. I hereby accept the deportment as registered office or registriced agent, or both, in pire State of Florida, Subuch change were authorized by the corporation's board of directors. I hereby accept the deportment as registered office or registriced agent, and minimis with, agent agents are authorized by the corporation's board of directors. I hereby accept the appointment as registered office or registriced agent, and minimis with agents. SIGNATURE 12.		9. Name and Address of Curr	ent Registered Ag	ent		······	10. Name and Address of New Re	gistered Ag	ent		
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 agent and an arrangement agent and account the obligations of Sections 617.0502 and 617.1508. Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent and familiar with, and accept the obligations of Section 617.0503 (hold statutes.) In the submit of the purpose of changing its registered of directors. I hereby accept the appointment as registered of directors. I hereby accept the appointment as registered of directors. I hereby accept the appointment as registered of agent and accept the obligations of Section 617.0503 (hold statutes.) ISONATURE SIGNATURE SUBMIT OF THE SUBMIT OF THE STATE OF THE S					81	Name					
OCALA FL 34470 85					82	Street	Address (P.O. Box Number is Not Acceptab	le)			
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SIGNATURE Signature, typed or principle agent and the application MOTE Registered Agent algorithms required when relatating) DATE	11 Purcuant	to the provinces of Sections 617.0	502 and 617 1508	Etorida Statute	e the abov	named	corporation submits this statement for the n		henging it	e registered	
SIGNATURE Signature, typed or principle agent and the application MOTE Registered Agent algorithms required when relatating) DATE	office or re	egistered agent, or both, in the Sta	te of Florida Such	change was a	thorized b	y the corp	poration's board of directors. I hereby accept	t the appoin	ntment as	registered	
Signature, typed or profession all apprications NOTE Registered Apport signature required whan reinstating)		m tamiliar with, and accept the obl	ligations of, Section	617,0503, Flor	ida Statute		_				
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ITIE	SIGNATURE _	Signature, typed or pinled name of registered a	agent an inc il applicable	. (NOTE:	Registered Ag			DATE	1997		
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I am an officer or director of director of the receiver or trace empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name	14. I do herel	by certify that the information supp	lied with this filing o	does not qualify	for the ex	emption s	tated in Section 119.07(3)(i), Florida Statute	s. I further o	ertify that	the	
	l am an o	fficer or director of the corporation	or the receiver or t	rustee empowe	ered to exe	cute this	report as required by Chapter 617, Florida S	tatules; and	I that my r	name	