

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000000983

FILED  
Jan 12, 2010  
Secretary of State

**Entity Name:** SEMINOLE SCHOOL BOARD LEASING CORP.

**Current Principal Place of Business:**

400 E LAKE MARY BOULEVARD  
SANFORD, FL 32773 US

**New Principal Place of Business:**

**Current Mailing Address:**

400 EAST LAKE MARY BOULEVARD  
SANFORD, FL 32773 US

**New Mailing Address:**

**FEI Number:** 59-3228993

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

VOGEL, BILL  
400 EAST LAKE MARY BOULEVARD  
SANFORD, FL 32773 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:** D  
**Name:** BAUER, DIANE  
**Address:** 423 EAGLE CIRCLE  
**City-St-Zip:** CASSELBERRY, FL 32707

**Title:** CD  
**Name:** ROBINSON, SANDY  
**Address:** P.O. BOX 952739  
**City-St-Zip:** LAKE MARY, FL 32795

**Title:** VCD  
**Name:** MORRIS, JEANNE  
**Address:** 1921 WINGFIELD DR.  
**City-St-Zip:** LONGWOOD, FL 32779

**Title:** D  
**Name:** POND, SYLVIA  
**Address:** P.O. BOX 521383  
**City-St-Zip:** LONGWOOD, FL 32752

**Title:** D  
**Name:** SCHAFFNER, DEDE  
**Address:** 200 SPRINGSIDE RD  
**City-St-Zip:** LONGWOOD, FL 32779

I hereby 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 all other like empowered.

**SIGNATURE:** SANDY ROBINSON

CD

01/12/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date