

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000005174

FILED
May 09, 2005
Secretary of State

Entity Name: PALM BEACH SCHOOL BOARD LEASING CORP.

Current Principal Place of Business:

3300 FOREST HILL BOULEVARD
WEST PALM BEACH, FL 33406

New Principal Place of Business:

Current Mailing Address:

3300 FOREST HILL BOULEVARD
WEST PALM BEACH, FL 33406

New Mailing Address:

FEI Number: 65-0531703 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

ARTHUR, JOHNSON
3300 FOREST HILL BOULEVARD
C-316
WEST PALM BEACH, FL 334065869 US

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 () Delete
Name: ROBINSON, DEBRA MD
Address: 3300 FOREST HILL BLVD C-316
City-St-Zip: WEST PALM BEACH, FL 33406

Title: D () Delete
Name: BENAIN, MONROE MD
Address: 3300 FOREST HILL BLVDC-316
City-St-Zip: WEST PALM BEACH, FL 33406

Title: D () Delete
Name: HANSEN, MARK
Address: 3300 FOREST HILL BLVD C-316
City-St-Zip: W PALM BEACH, FL 33406

Title: D () Delete
Name: RICHMOND, SANDRA S
Address: 3300 FOREST HILL BLVD C-316
City-St-Zip: WEST PALM BEACH, FL 33406

Title: S () Delete
Name: JOHNSON, ARTHUR
Address: 3300 FOREST HILL BLVD C-316
City-St-Zip: WEST PALM BEACH, FL 33406

Title: CD () Delete
Name: LYNCH, TOM
Address: 3300 FOREST HILL BLVD C-316
City-St-Zip: WEST PALM BEACH, FL 33406

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: ARTHUR J. JOHNSON

DR.

05/09/2005

Electronic Signature of Signing Officer or Director

Date