2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000000861

City-St-Zip:

Title:

Name:

Address:

City-St-Zip:

Entity Name: MONROE SCHOOL BOARD LEASING CORP.

FILED Jun 11, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 241 TRUMBO ROAD KEY WEST, FL 33040 US **Current Mailing Address: New Mailing Address:** 241 TRUMBO ROAD KEY WEST, FL 33040 US FEI Number: 65-0728948 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LANNON, MICHAEL J PADGET, JOHN R 241 TRUMBO RD 241 TRUMBO RD KEY WEST, FL 33040 KEY WEST, FL 33040 US 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: JOHN R. PADGET 06/11/2004 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete LABRADA, PATRICK G LABRADA, PATRICK G Name: Name: 241 TRUMBO ROAD Address: 241 TRUMBO ROAD Address: City-St-Zip: KEY WEST, FL 33040 City-St-Zip: KEY WEST, FL 33040 Title: () Delete Title: (X) Change () Addition GRIFFITHS, ANDY GRIFFITHS, ANDY Name: Name: Address: 241 TRUMBO ROAD Address: 241 TRUMBO ROAD City-St-Zip: KEY WEST, FL 33040 City-St-Zip: KEY WEST, FL 33040 Title: () Delete Title: () Change () Addition WALKER, DEBRA Name: Name: Address: 241 TRUMBO ROAD Address: City-St-Zip: KEY WEST, FL 33040 City-St-Zip: Title: () Delete Title: () Change () Addition Name: COHAN, ANNE K Name: 241 TRUMBO ROAD Address: Address: KEY WEST, FL 33040

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.

City-St-Zip:

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: EILEEN QUINN C 06/11/2004

() Delete

QUINN, ELEEN

241 TRUMBO ROAD

KEY WEST, FL 33040

(X) Change () Addition

QUINN, EILEEN

241 TRUMBO ROAD

KEY WEST, FL 33040