

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000000905

FILED  
Jan 06, 2010  
Secretary of State

**Entity Name:** HENDRY COUNTY SCHOOL BOARD LEASING CORP.

**Current Principal Place of Business:**

111 CURRY STREET  
LABELLE, FL 33935

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 1980  
LABELLE, FL 33975 US

**New Mailing Address:**

**FEI Number:** 59-6000641

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MURPHY, RICHARD A  
111 CURRY STREET  
LABELLE, FL 33935 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: BEATTY, MATTHEW  
Address: 410 EAST OSCEOLA AVENUE  
City-St-Zip: CLEWISTON, FL 33440

Title: D  
Name: LANGFORD, PATRICK B  
Address: P.O. BOX 122  
City-St-Zip: LABELLE, FL 33975

Title: D  
Name: BERG, EVA S  
Address: 125 WILSON ROAD  
City-St-Zip: LABELLE, FL 33935

Title: D  
Name: BROWN, DWAYNE E  
Address: P. O. BOX 684  
City-St-Zip: CLEWISTON, FL 33440

Title: D  
Name: CLINARD, RAY A  
Address: 630 GRATTON ROAD  
City-St-Zip: CLEWISTON, FL 33440

Title: S  
Name: MURPHY, RICHARD A  
Address: 111 CURRY STREET  
City-St-Zip: LABELLE, FL 33935

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: RICHARD A. MURPHY

SUPT

01/06/2010

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

\_\_\_\_\_  
Date