


# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 21, 2008 8:00 am**  
**Secretary of State**

04-21-2008 90096 019 \*\*\*150.00

<b>DOCUMENT # P00000078436</b>					
<b>1. Entity Name</b> S & J LEASING, INC.					
<b>Principal Place of Business</b> 24420 SANDHILL BLVD 103 PUNTA GORDA, FL 33983			<b>Mailing Address</b> 24420 SANDHILL BLVD 103 PUNTA GORDA, FL 33983		
<b>2. Principal Place of Business - No P.O. Box #</b> 24430 SANDHILL BLVD			<b>3. Mailing Address</b> Suite, Apt. #, etc.		
Suite, Apt. #, etc. SUITE 303			Suite, Apt. #, etc.		
<b>City &amp; State</b> PUNTA GORDA, FL			<b>City &amp; State</b>		
<b>Zip</b> 33983		<b>Country</b> United States		<b>4. FEI Number</b> 65-1047677	
<b>5. Certificate of Status Desired</b> <input type="checkbox"/>				<b>\$8.75 Additional Fee Required</b>	
<b>6. Name and Address of Current Registered Agent</b>  STEPHENSON, JACK F 24420 SANDHILL BLVD. 103 PUNTA GORDA, FL 33983			<b>7. Name and Address of New Registered Agent</b>  Name  Street Address (P.O. Box Number is Not Acceptable)  City  <div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div>		
<b>8. 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. I am familiar with, and accept the obligations of registered agent.</b>					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2008 Fee will be \$550.00</b>		<b>9. Election Campaign Financing</b> <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>			
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	VSTD JOHNS, ALFRED M 24420 SANDHILL BLVD., #103 PUNTA GORDA, FL 33983	<input type="checkbox"/> Delete			
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	PD STEPHENSON, JACK F 24420 SANDHILL BLVD. #103 PUNTA GORDA, FL 33983	<input type="checkbox"/> Delete			
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<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>		<input type="checkbox"/> Delete			
<b>12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplementary report is true and accurate and that my 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with my address, with or other like empowered.</b>					
<b>SIGNATURE:</b> _____ <div style="float: right; text-align: right;">                     4/14/08 9417668028  <small>Daytime Phone #</small> </div>					