

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000025174

Entity Name: NALL LEASING, INC.

FILED  
Feb 26, 2007  
Secretary of State

## Current Principal Place of Business:

628 N. FLETCHER AVE  
MAYO, FL 32066

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 1286  
MAYO, FL 32066

## New Mailing Address:

FEI Number: 46-0479310

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NALL, FELIX  
628 N. FLETCHER AVE  
MAYO, FL 32066 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: NALL, FELIX  
Address: PO BOX 1286  
City-St-Zip: MAYO, FL 32066

Title: DV ( ) Delete  
Name: NALL, PATRICIA A  
Address: PO BOX 1286  
City-St-Zip: MAYO, FL 32066

Title: DST ( ) Delete  
Name: BYRD, CHERYL  
Address: PO BOX 1286  
City-St-Zip: MAYO, FL 32066

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: NALL, FELIX  
Address: PO BOX 1286  
City-St-Zip: MAYO, FL 32066

Title: VD (X) Change ( ) Addition  
Name: NALL, PATRICIA A  
Address: PO BOX 1286  
City-St-Zip: MAYO, FL 32066

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 Chapter 119, 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: FELIX NALL

PD

02/26/2007

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

\_\_\_\_\_  
Date