## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

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## DOCUMENT # P02000089998

Entity Name
 OLYMPUS LEASING COMPANY

FILED
Mar 10, 2004 08:00 AM
Secretary of State

Principal Place of Business 4744 SPINNAKER DR BRADENTON, FL 34208 Mailing Address 4744 SPINNAKER DR BRADENTON, FL 34208



01062004

No Chg-P

CR2E034 (10/03)

4. FEI Number 14-1843441 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

UCCELLO, ANTONIO F 4744 SPINNAKER DR BRADENTON, FL 34208

SIGNATURE:

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	named entity submits this statement for the pions of registered agent.	urpose of changing its registered	d office or r	egistered agent, or bo	th, in the State of Florida. I am familiar with, and accept
SIGNATURE	Signature, typed or printed name of registered agent and title if	f applicable (NOTE, Registered	Agent signature	required when reinstating)	DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution.		\$5.00 May Be Added to Fees	U00000082597 03/10/04-80001-023 150.00
10.	OFFICERS AND DIREC	CTORS			(
TITLE NAME STREET ADDRESS GITY-ST-ZIP	P UCCELLO, ANTONIO F 4744 SPINNAKER DR. BRADENTON, FL 34208		-		·
TITLE NAME STREET ADORESS CITY-ST-ZIP					
THE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
WILE NAME STREET ADDRESS CHY-ST-ZIP				IN '	THIS SPACE
BILE NAME STREET ADDRESS CITY-ST-ZIP					
TATLE NAME STREET ADDRESS CITY-ST-ZIP					
12. I hereby certify that the information Supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplementary eport 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 relever or it yields 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 an address, with all other life expowered.					

G OFFICER OR DIRECTOR