

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000023613

Entity Name: WORTH LEASING COMPANY

FILED  
Jan 30, 2009  
Secretary of State

## Current Principal Place of Business:

7965 LANTANA RD  
LAKE WORTH, FL 33467 US

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 541779  
LAKE WORTH, FL 33454 US

## New Mailing Address:

FEI Number: 04-3746504

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SMIGIEL, GARY L.C.  
7965 LANTANA RD  
LAKE WORTH, FL 33467 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: P ( ) Delete  
Name: MECCA, PETER L  
Address: P.O. BOX 541779  
City-St-Zip: LAKE WORTH, FL 33454

Title: ST ( ) Delete  
Name: MECCA, LEONARD  
Address: P.O. BOX 541779  
City-St-Zip: LAKE WORTH, FL 33454

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: PETER L. MECCA ESTAT, E  
Address: P.O. BOX 541779  
City-St-Zip: LAKE WORTH, FL 33454

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: LEONARD MECCA

ST

01/30/2009

Electronic Signature of Signing Officer or Director

Date