

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 14, 2008 08:00 AM
Secretary of State

DOCUMENT # P04000008221

1. Entity Name
PORT CANAVERAL LEASING & STORAGE, INC.



Principal Place of Business Mailing Address
3960 S. BANANA RIVER BLVD. 3960 S. BANANA RIVER BLVD.
COCOA BEACH, FL 32931 COCOA BEACH, FL 32931



01052008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-0543008 Applied For Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

RUNYAN, GARY G
3960 S. BANANA RIVER BLVD.
COCOA BEACH, FL 32931

**DO NOT WRITE
IN THIS SPACE**

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.

SIGNATURE _____ DATE _____
Signature: typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

000000780883
01/15/08-80013-005 150.00

10. OFFICERS AND DIRECTORS

TITLE V
NAME RUNYAN, GARY G
STREET ADDRESS 3960 S. BANANA RIVER BLVD.
CITY-ST-ZIP COCOA BEACH, FL 32931

TITLE P
NAME DAVIS, STEVEN D
STREET ADDRESS 759 NIGHTINGALE DR.
CITY-ST-ZIP INDIALANTIC, FL 32903

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

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 supplemental 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 an address, with all other like empowered.

SIGNATURE: Gary Runyan
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-10-08 321-784-4515

Date Daytime Phone #