

ANNUAL REPORT

DOCUMENT # P93000019965

1. Entity Name
EPLING LEASING COMPANY



FILED
Jan 18, 2005 08:00 AM
Secretary of State

Principal Place of Business
10400 NW S. RIVER DRIVE
MEDLEY, FL 33178

Mailing Address
1781 BENNINGFIELD DRIVE
MARIETTA, GA 30064



01112005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0431512

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

EPLING, ROBY R JR
10400 NW S. RIVER DRIVE
MEDLEY, FL 33178

**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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

| | |
|----------------|-------------------------|
| TITLE | PT |
| NAME | EPLING, ROBY R JR |
| STREET ADDRESS | 10400 NW S. RIVER DRIVE |
| CITY-ST-ZIP | MEDLEY, FL 33178 |
| TITLE | VPS |
| NAME | PETERSON, DAWN E |
| STREET ADDRESS | 1781 BENNINGFIELD DRIVE |
| CITY-ST-ZIP | MARIETTA, GA 33064 |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |

**DO NOT WRITE
IN THIS SPACE**

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01/19/05-80011-008 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

[Signature]