

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000058329

Entity Name: SANDAR LEASING, INC.

FILED  
Feb 12, 2009  
Secretary of State

**Current Principal Place of Business:**

1545 MAIN STREET  
ATLANTIC BEACH, FL 32233

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 33106  
ATLANTIC BEACH, FL 322330106 US

**New Mailing Address:**

FEI Number: 59-3205101

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

LUNNY, GREGORY F  
1301 RIVERPLACE BLVD  
STE 500  
JACKSONVILLE, FL 32207 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: D ( ) Delete  
Name: RODRIGUEZ, PETER A  
Address: 1545 MAIN STREET  
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: D ( ) Delete  
Name: RODRIGUEZ, DELIA  
Address: 1545 MAIN STREET  
City-St-Zip: ATLANTIC BEACH, FL 32233

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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: DELIA RODRIGUEZ

D

02/12/2009

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

\_\_\_\_\_  
Date