2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P93000065235

Name:

Address:

City-St-Zip:

FILED Jul 07, 2005 Secretary of State

Entity Name: PRS LEASING, INC. **Current Principal Place of Business: New Principal Place of Business:** 10727 HAMPTON PL JACKSONVILLE, FL 32257 **Current Mailing Address: New Mailing Address:** P.O. BOX 24597 P.O. BOX 37041 JACKSONVILLE, FL 32241 US JACKSONVILLE, FL 32236 US FEI Number: 59-3202536 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: AKEL, DANIEL D 2301 INDEPENDENT SQUARE ONE INDEPENDENT DR. JACKSONVILLE, FL 32202 US 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition HENDERSON, GARY Name: Name: 11361 TRADE COURT Address: Address: City-St-Zip: JACKSONVILLE, FL 32256 City-St-Zip: Title: () Delete Title: () Change (X) Addition

Name:

Address:

City-St-Zip:

COLLINS, MARK

7847 KNOLL DRIVE SOUTH JACKSONVILLE, FL 32221

I hereby certify that the information supplied with this filing does not qualify for the 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 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: MARK COLLINS VP 07/07/2005