

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 15, 2008 8:00 am**  
**Secretary of State**

01-15-2008 90035 022 \*\*\*158.75

DOCUMENT # P94000078141

1. Entity Name  
REPCO EQUIPMENT LEASING, INC.



Principal Place of Business  
1550 STARKEY ROAD  
LARGO, FL 33771 US

Mailing Address  
1550 STARKEY ROAD  
LARGO, FL 33771 US

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01032008

Chg-P

CR2E034 (12/06)

4. FEI Number  
59-3281891

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PURCELL, RAYMOND E  
1550 STARKEY ROAD  
LARGO, FL 33771

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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: If a third party is required to sign, a signature is required when reinstating)

DATE

**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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
D  
PURCELL, RAYMOND E  
STREET ADDRESS  
1550 STARKEY ROAD  
CITY- ST- ZIP  
LARGO, FL 33771 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
VP  
PHILLIPS, DALE E  
STREET ADDRESS  
1550 STARKEY ROAD  
CITY- ST- ZIP  
LARGO, FL 33771 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP  
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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 *Raymond E. Purcell*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Raymond E. Purcell

1/3/08

727-584-3329

Date

Daytime Phone #