2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P97000064174

ANTHONY, CARL A

103 FOXWOOD DR

BRANDON, FL 33510

Name:

Address:

City-St-Zip:

Entity Name: CORNERSTONE LEASING, INC.

FILED Jan 23, 2003 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
3936 PAUL S. BUCHMAN HWY ZEPHYRHILLS, FL 33540 US				3936 PAUL S. BUCHMAN HWY ZEPHYRHILLS, FL 33542 US	
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
3936 PAUL S. BUCHMAN HWY ZEPHYRHILLS, FL 33540 US				3936 PAUL S. BUCHMAN HWY ZEPHYRHILLS, FL 33542 US	
FEI Number	: 59-3462436	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
HUBBARD, MARY JANE 3936 PAUL S. BUCHMAN HWY ZEPHYRHILLS, FL 33540 US			3936 PAUL S. BUCH	HUBBARD, MARY JANE 3936 PAUL S. BUCHMAN HWY ZEPHYRHILLS, FL 33542 US	
	named entity se of Florida.	submits this statement for the p	urpose of changing its register	ed office or registered agent, or both,	
SIGNATURE:				01/23/2003	
	Electron	ic Signature of Registered Age	nt	Date	
Election Car	mpaign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	DP () HUBBARD, MAF 6449 COUNTRY WESLEY CHAP	CLUB RD.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VTS () HUBBARD, C. E 6449 COUNTRY WESLEY CHAP	CLUB RD.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	WINSBRO, KEN 12217 JEFFER	Y LN	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	VS ()	Delete	Title:	() Change () Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: MARY JANE HUBBARD PD 01/23/2003