FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B Morth/n

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000087246 (9)

FLEET TRUCK LEASING, INC.

Principal Place of Business Mailing Address				.8111 18819 FIBEL DIBIN \$111 1007	
1971 W. LUMSDEN RD. #362 BRANDON FL 33511		1971 W. LUMSDEN RD. #362 BRANDON FL 33511		DO NOT WRITE IN THI	IC CDACE
				3. Date Incorporated or Qualified	O BI AGE
-				10/09/1997	
2. Principal P	lace of Business	2a. Mading Address	·	4. FEI Number	Applied For
21		26		59-3475193	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27		6. Certhicate of Status Desired	Fee Required
City & State	e	City & State		6. Election Campaign Financing	\$5.00 May Be
23	Constant	28	Country	Trust Fund Contribution	Added to Fees
Zip 24	• Country	Zip	Country	 This corporation owes or has paid the or Personal Property Tax due June 30. 	current year Intangible
24	25 S. Name and Address of Current	. 4 · . 4 ·	301	10. Name and Address of New Registere	
ALCOVARIETY LAPRY D					
			(LARRY D. MCKINNE	· 7
BRANDON FL 33511			82 Street Add	ress (P.O. Box Number is Not Acceptable)	nP
0,0	AIDON I E 00011		83		<u> </u>
			51 0		
İ			84 City R	WERNIEW F	L 85 Zp Code 3
11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered					
office or rogistered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE					
	Signature, typed or people a name of registered agen		Registered Agent signature requ		
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE NAME	MCKINNEY, LARRY D	□ DELI IL	1.1 TITLE 1 2 NAME		C Change C Addition
STREET ADDRESS	1971 W. LUMSDEN RD. #362		1.3 STREET ADDRESS		
CITY-ST-ZIP	B RANDON FL 33511		1.4 CHY-ST-ZIP];
TITLE	DV	DELETE	2.1 Title		Change Addition
NAME	MCKINNEY, PEGGY C	,	2.2 NAME		
STREET ADDRESS	1971 W. LUMSDEN RD. #362		2.3 STREET ADDRESS		
CATY-ST-ZIP	BRANDON FL 33511		2 4 CITY-ST-7IP		1
TITLE		☐ DELETE	31 TITLE		Change Addition
NAME			32 NAME		
STREET ADDRESS			3 3 STREET ADDRESS		
CITY-ST-ZIP			3 4. Crty - ST - ZIP		
TITLE		∐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	4.4 CITY - ST - ZIP		Change Addition
TITLE		TI DETELE	5.1 TITLE		Change Changini
NAME CTREET ANDRECO			5.2 NAME 5.3 STHEET ADDRESS		
STREET ADDRESS CITY-ST-ZIP			5.3 STHEET ADDRESS		
TITLE		DELETE	6.1 HILE		Change Addition
NAME		. 	6.2 NAME		. –
STREET ADDRESS			6.3 STREET ADDRESS		Ì
			•		

14. Thereby cortify 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 annual report or suppliemental annual 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 conformation of the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an allocations with the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or suppliemental annual report of 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 annual report or suppliemental annual report of supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(ii), Florida Statutes. I further certify that I am an officer or director of the conformation or the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed on the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes. I further certify that the information indicated on this annual report of the conformation of

FILED

May 22 1998 8:00am

Secretary of State