## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P98000091919

Entity Name: CFLEASING, INC.

FILED Jan 22, 2004 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

1100 N MAIN ST 4700 MILLENIA BLVD., 6TH FLOOR

ORLANDO, FL 32839 STE KISSIMMEE, FL 34744

**New Mailing Address: Current Mailing Address:** 

PO BOX 470367 4700 MILLENIA BLVD., 6TH FLOOR

CELEBRATION, FL 34747 ORLANDO, FL 32839

FEI Number: 59-3540220 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

MYERS, JARED M MEYERS, JARED M 1100 NÓRTH MAIN ST STE A 4700 MILĹENIA BLVD., 6TH FLOOR KISSIMMEE, FL 34744 ORLANDO, FL 32839

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: JARED M MEYERS 01/22/2004

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title: (X) Change ( ) Addition

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Name: MEYERS, JARED Name: MEYERS, JARED 1100 NORTH MAIN ST STE A 4700 MILLENIA BLVD., 6TH FLOOR Address: Address:

City-St-Zip: KISSIMMEE, FL 34744 City-St-Zip: ORLANDO, FL 32839

DCS Title: DCS Title: () Delete (X) Change ( ) Addition Name: MYERS, NEIL Name: MEYERS, NEIL

1100 NORTH MAIN ST STE A 4700 MILLENIA BLVD., 6TH FLOOR Address: Address:

KISSIMMEE, FL 34744 ORLANDO, FL 32839 City-St-Zip: City-St-Zip:

Title: ( ) Delete Title: ( ) Change (X) Addition **FVP** 

Name: LEWIS, CRAIG Name:

4700 MILLENIA BLVD., 6TH FLOOR Address Address:

City-St-Zip: City-St-Zip: ORLANDO, FL 32839

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: JARED M MEYERS **DPS** 01/22/2004