

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jun 10, 2004 08:00 AM
Secretary of State

DOCUMENT # P99000008274

1. Entity Name

NEW MILLENNIUM LEASING, INC.



Principal Place of Business

**1059 MAITLAND CENTER COMMON
SUITE 250
MAITLAND, FL 32751**

Mailing Address

**1059 MAITLAND CENTER COMMON
SUITE 250
MAITLAND, FL 32751**



05272004

No Chg-P

CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0888907

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**CUMMING, BRIAN S
1059 MAITLAND CENTER COMMONS BLVD
SUITE 250
MAITLAND, FL 32751**

**DO NOT WRITE
IN THIS SPACE**

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: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$550.00
Due by September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PVPS
NAME	CUMMING, BRIAN S
STREET ADDRESS	40 CYPRESS LN
CITY-ST-ZIP	WINTER PARK, FL 32289
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000162448
06/10/04-80005-009 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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, changed, or on an attachment with an address, with an other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Brian S. Cumming
Brian S. Cumming

6/4/04
6/4/04

407659-0653
407659-0653

Date

Daytime Phone #