

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 20, 2006 08:00 AM
Secretary of State

DOCUMENT # P99000099562	
1. Entity Name CENTRAL FLORIDA SALES AND LEASING, INC.	

Principal Place of Business 9126 BACHMAN ROAD ORLANDO, FL 32824	Mailing Address 9126 BACHMAN ROAD ORLANDO, FL 32824
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01142006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3608174	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent BINNS, ROBERT H 9126 BACHMAN ROAD ORLANDO, FL 32824

**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 _____ (NOTE: Registered Agent signature required when reinstalling) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

U000000474974
04/04/06-80045-004 150.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BINNS, ROBERT H 9126 BACHMAN ROAD ORLANDO, FL 32824
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD BINNS, ROXANE L 9126 BACHMAN ROAD ORLANDO, FL 32824
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST BINNIS, ROBERT H 9126 BACHMAN RD ORLANDO, FL 32824
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

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: Robert H. Binns 1-20-06 (407)-438-2220
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #