FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT

1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAY -1 PM 1:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **S43071** **(7)**

1. Corporate Name

DIVERSIFIED LEASING INVESTMENTS, INC.

Principal Place of Business	Mailing Address
577 N. SEMORAN BLVD. ORLANDO FL 32807	577 N. SEMORAN BLVD. ORLANDO FL 32807

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **04/03/1991**

3a. Date of Last Report: **05/01/1994**

2. Principal Place of Business (21)

2a. Mailing Address (26)

4. FEI Number: **59-3069622** ☐ Applied For ☐ Not Applicable

Suite, Apt. #, etc. (22)

Suite, Apt. #, etc. (27)

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

City & State (23)

City & State (28)

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

Zip (24) County (25)

Zip (29) County (30)

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

BREWSTER, NORMAN R.
577 N. SEMORAN BLVD.
ORLANDO FL 32807

10. Name and Address of New Registered Agent

81 Name: NORMAN BREWSTER R

82 Street Address (P.O. Box Number is Not Acceptable): 7324 EAST COLONIAL DR

83

84 City: ORLANDO FL 85 Zip Code: 32826

11. Pursuant to the provisions of Sections 607.0501 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered 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. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE: [signature] 4/19/95

12. OFFICERS AND DIRECTORS	13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12
P BROWSTER, NORMAN R. 11148 LANE PARK RD. TAVARES FL 32778	☐ Change ☐ Addition
	☐ Change ☐ Addition
	☐ Change ☐ Addition
	☐ Change ☐ Addition
	☐ Change ☐ Addition
	☐ Change ☐ Addition

14. I declare, I certify that the information supplied with this filing is truthfully furnished and 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 supplemental 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 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 12 or Block 13 (if changed), or on an attached sheet, with an address.

SIGNATURE: [signature] 4/19/95

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date

0067672 CP