

Mar 24 1997 8:00am
Secretary of State

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

1. Corporation Name
BRADY LEASING SERVICES, INC.

Principal Place of Business	Mailing Address
837 BIRDWOOD DR ORANGE PARK FL 32073	837 BIRDWOOD DR ORANGE PARK FL 32073-5341

3. Date Incorporated or Qualified 07/25/1991	3a. Date of Last Report 04/29/1996
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2. Principal Place of Business		2a. Mailing Address		4. FEI Number 59-3078439		Applied For	
21	Street, Apt. #, etc.	26	Street, Apt. #, etc.	5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
22	City & State	27	City & State	6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
23	Zip	28	Zip	8. This corporation has liability for incurring tax under s. 199.032, Florida Statutes ☒ Yes ☐ No			
24	Country	29	Country				
25		30					

9. Name and Address of Current Registered Agent

BRADY, DALE J.
937 BIRDWOOD DR
ORANGE PARK FL 32073

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
85	Zip Code

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 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 and I agree to accept the obligations of Section 607.0505, Florida Statutes.

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

12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
NAME	P	1.1 TITLE	☐ Change ☐ Addition
STREET ADDRESS	BRADY, DALE J	1.2 NAME	
CITY - ST - ZIP	937 BIRDWOOD DR	1.3 STREET ADDRESS	
TITLE	ORANGE PARK FL	1.4 CITY - ST - ZIP	
NAME	S	2.1 TITLE	☐ Change ☐ Addition
STREET ADDRESS	BRADY, PATRICIA A.	2.2 NAME	
CITY - ST - ZIP	937 BROWARD DR	2.3 STREET ADDRESS	
TITLE	ORANGE PARK FL	2.4 CITY - ST - ZIP	
NAME		3.1 TITLE	☐ Change ☐ Addition
STREET ADDRESS		3.2 NAME	
CITY - ST - ZIP		3.3 STREET ADDRESS	
TITLE		3.4 CITY - ST - ZIP	
NAME		4.1 TITLE	☐ Change ☐ Addition
STREET ADDRESS		4.2 NAME	
CITY - ST - ZIP		4.3 STREET ADDRESS	
TITLE		4.4 CITY - ST - ZIP	
NAME		5.1 TITLE	☐ Change ☐ Addition
STREET ADDRESS		5.2 NAME	
CITY - ST - ZIP		5.3 STREET ADDRESS	
TITLE		5.4 CITY - ST - ZIP	
NAME		6.1 TITLE	☐ Change ☐ Addition
STREET ADDRESS		6.2 NAME	
CITY - ST - ZIP		6.3 STREET ADDRESS	
TITLE		6.4 CITY - ST - ZIP	

14. I do hereby certify 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 is stated on the company's 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 of the record, or on an attachment with an address.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date _____

Overview: Physics of

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CR2E034 (9/96)