

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V56540

FILED  
Jan 20, 2004  
Secretary of State

Entity Name: WEST CENTRAL FLORIDA LEASING CO., INC.

**Current Principal Place of Business:**

16170 AVIATION LOOP DRIVE  
BROOKSVILLE, FL 34609

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 15609  
BROOKSVILLE, FL 34609 US

**New Mailing Address:**

P.O. BOX 20  
BROOKSVILLE, FL 34601 US

FEI Number: 59-3140238

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

KURPPE, GEORGE SR.  
1242 LANSING DR.  
SPRINGHILL, FL 34608 US

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

KURPPE, GEORGE  
1242 LANSING DR.  
SPRINGHILL, FL 34608 US

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: GEORGE KURPPE

01/20/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: KURPPE, GEORGE SR.,  
Address: 1242 LANSING DR.  
City-St-Zip: SPRING HILL, FL 34608

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DPST (X) Change ( ) Addition  
Name: KURPPE, GEORGE  
Address: 1242 LANSING DR.  
City-St-Zip: SPRING HILL, FL 34608

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: GEORGE KURPPE

P

01/20/2004

Electronic Signature of Signing Officer or Director

Date