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**APPROVED
AND
FILED**

**CORPORATION
ANNUAL REPORT
1995**



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

95 FEB 24 PM 2: 54

SECRETARY OF STATE
ALLAHASSEE, FLORIDA

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3600.00 *200.00

DO NOT WRITE IN THIS SPACE.

DOCUMENT # 299166 (9)
1. Corporation Name
FERMAN MOTOR LEASING CORPORATION

Principal Place of Business Mailing Address
POST OFFICE BOX 1321 TAMPA FL 33601 **POST OFFICE BOX 1321 TAMPA FL 33601**

3. Date Incorporated or Qualified **11/30/1965** 3a. Date of Last Report **02/18/1994**

4. FEI Number **59-1259235** Applied For Not Applicable

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

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

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

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip 24 Country 25 29 Zip 30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**UITERWYK, STEVEN A.
1307 W. KENNEDY BLVD.
TAMPA FL 33606**

B1 Name
B2 Street Address (P.O. Box Number is Not Acceptable)
B3
B4 City **FL** B5 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

NOTE: Registered Agent signature required when reelecting

(DATE)

12. OFFICERS AND DIRECTORS	
TITLE	CD
NAME	FERMAN, JAMES L, SR.
STREET ADDRESS	1307 W KENNEDY BLVD.
CITY - ST - ZIP	TAMPA FL
TITLE	PD
NAME	FERMAN, JAMES L, JR.
STREET ADDRESS	1307 W KENNEDY BLVD.
CITY - ST - ZIP	TAMPA FL
TITLE	SD
NAME	FERMAN, MARTHA S.
STREET ADDRESS	1307 W KENNEDY BLVD.
CITY - ST - ZIP	TAMPA FL
TITLE	TD
NAME	FERMAN, CECELIA D.
STREET ADDRESS	1307 W KENNEDY BLVD.
CITY - ST - ZIP	TAMPA FL
TITLE	D
NAME	JANICE F. STRASKE
STREET ADDRESS	1307 WEST KENNEDY BLVD
CITY - ST - ZIP	TAMPA FL
TITLE	D
NAME	LAURA F. FARRIOR
STREET ADDRESS	1307 WEST KENNEDY BLVD
CITY - ST - ZIP	TAMPA FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1 1 TITLE	Asst-S <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1 2 NAME	Uiterwyk, Steven A.
1 3 STREET ADDRESS	1307 W. Kennedy Blvd.
1 4 CITY - ST - ZIP	Tampa, FL 33601
2 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2 2 NAME	
2 3 STREET ADDRESS	
2 4 CITY - ST - ZIP	
3 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3 2 NAME	
3 3 STREET ADDRESS	
3 4 CITY - ST - ZIP	
4 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4 2 NAME	
4 3 STREET ADDRESS	
4 4 CITY - ST - ZIP	
5 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5 2 NAME	
5 3 STREET ADDRESS	
5 4 CITY - ST - ZIP	
6 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6 2 NAME	
6 3 STREET ADDRESS	
6 4 CITY - ST - ZIP	

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2/24/95

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), 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 attachment with an address.

SIGNATURE *James L. Ferman Jr.* **James L. Ferman Jr. Pres/Director 01/23/95 (813)251-2765**
SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERING OFFICER OR DIRECTOR