2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 808351

City-St-Zip:

FARMINGTON, CT 06032

FILED Mar 19, 2009 Secretary of State

Entity Name: THE MOTORLEASE CORPORATION		
Current Principal Place of Business:	New Principal Place o	f Business:
1506 NEW BRITAIN AVE FARMINGTON, CT 06032		
Current Mailing Address:	New Mailing Address:	
1506 NEW BRITAIN AVE FARMINGTON, CT 06032		
FEI Number: 06-0805450 FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:		New Registered Agent:
LEARY, DANIEL 1537 BEACHWALKER ROAD AMELIA ISLAND, FL 32034 US		
The above named entity submits this statement for the in the State of Florida.	purpose of changing its registered	office or registered agent, or both,
SIGNATURE:		
Electronic Signature of Registered Ac	gent	Date
Election Campaign Financing Trust Fund Contribution ().		
FFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DI		TO OFFICERS AND DIRECTORS
Title: PD () Delete	Title: PD (2	X) Change () Addition

LEARY, JOHN M Name: LEARY, J M Name: 1506 NEW BRITAIN AVE 1506 NEW BRITAIN AVE Address: Address: City-St-Zip: FARMINGTON, CT 06032 City-St-Zip: FARMINGTON, CT 06032 Title: VTD () Delete Title: (X) Change () Addition KANDRYSAWTZ, E L KANDRYSAWTZ, ELISABETH L Name: Name: Address: 1506 NEW BRITAIN AVE Address: 1506 NEW BRITAIN AVE FARMINGTON, CT 06032 FARMINGTON, CT 06032 City-St-Zip: City-St-Zip: Title: () Change () Addition Title: (X) Delete Name: FERRARESSO, R M Name: Address: 1506 NEW BRITIAN AVE Address:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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.

City-St-Zip:

SIGNATURE: ELISABETH KANDRYSAWTZ VTD 03/19/2009