

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 831114

FILED  
Apr 06, 2005  
Secretary of State

Entity Name: WELLS FARGO LEASING CORPORATION

## Current Principal Place of Business:

1350 MONETGO WAY  
WALNUT CREEK, CA 94598 US

## New Principal Place of Business:

## Current Mailing Address:

SIXTH AND MARQUETTE  
MAC N9035-173  
MINNEAPOLIS, MN 55479 US

## New Mailing Address:

FEI Number: 94-1754247 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: COSSO, LOUIS M  
Address: A0112-070, 550 CALIFORNIA STREET  
City-St-Zip: SAN FRANCISCO, CA 94104

Title: DSVP ( ) Delete  
Name: FOSSEY, BRENT C  
Address: N9101-050, 55 EAST FIFTH STREET  
City-St-Zip: ST. PAUL, MN 55101

Title: AS ( ) Delete  
Name: LANE, SUSAN H  
Address: N9305-173 SIXTH & MARQUETTE  
City-St-Zip: MINNEAPOLIS, MN 55479

Title: D ( ) Delete  
Name: TSANG, PAUL S  
Address: A0190-258, 120 KEARNY STREET  
City-St-Zip: SAN FRANCISCO, CA 94108

Title: EVP ( ) Delete  
Name: CALLAHAN, PATRICIA R  
Address: A0101-121, 420 MONTGOMERY STREET  
City-St-Zip: SAN FRANCISCO, CA 94014

Title: SVPT ( ) Delete  
Name: REWCASTLE, PHILLIP J  
Address: A0112-070, 550 CALIFORNIA STREET  
City-St-Zip: SAN FRANCISCO, CA 94104

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: AS (X) Change ( ) Addition  
Name: WEBER, MARGARET M  
Address: N9305-173 SIXTH & MARQUETTE  
City-St-Zip: MINNEAPOLIS, MN 55479

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: MARGARET M. WEBER

AS

04/06/2005

Electronic Signature of Signing Officer or Director

Date