

5/17

FILED
Jul 02, 2001 8:00 am
Secretary of State

05-17-2001 91347 040 ***150.00

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F0000000577

1. Entity Name
HONEYWELL LEASING COMPANY INC.



Principal Place of Business
101 COLUMBIA ROAD
MORRISTOWN NJ 07962

Mailing Address
101 COLUMBIA ROAD
MORRISTOWN NJ 07962

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip Country



22-359969

DO NOT WRITE IN THIS SPACE

4. FEI Number **APPLIED FOR**
Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent
C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

8. 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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GELLY, JAMES V 101 COLUMBIA ROAD MORRISTOWN NJ 07962	<input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V SINAIKIN, RONALD A 101 COLUMBIA ROAD MORRISTOWN NJ 07962	<input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD PATRICK, VICTOR P 101 COLUMBIA ROAD MORRISTOWN NJ 07962	<input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD GRANATO, JOHN J 101 COLUMBIA ROAD MORRISTOWN NJ 07962	<input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS SMITH, J. EDWARD 101 COLUMBIA ROAD MORRISTOWN NJ 07962	<input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS EDWARDS, MONIQUE 101 COLUMBIA ROAD MORRISTOWN NJ 07962	<input type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/>	<input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/>	<input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/>	<input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/>	<input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/>	<input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/>	<input type="checkbox"/>

13. I 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 indicated on this report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Paul H. Braunstein P.H. Braunstein 4/30/01 973455510-3
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)