

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
 AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED
Aug 27, 1999 8:00 am
Secretary of State
 08-27-1999 90002 031 ***550.00



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

PROFIT CORPORATION
 ANNUAL REPORT
1999

DOCUMENT # F93000004468
 1. Corporation Name
COMPASS EQUIPMENT LEASING, INC.



Principal Place of Business Mailing Address
 103 SPRINGER BLDG. 103 SPRINGER BLDG.
 3411 SILVERSIDE ROAD 3411 SILVERSIDE ROAD
 WILMINGTON DE 19810 WILMINGTON DE 19810

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 2a. Mailing Address
 21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
 22 City & State 27 City & State
 23 Zip 28 Zip
 24 Country 29 Country 30

3. Date Incorporated or Qualified
10/04/1993
 4. FEI Number Applied For
51-0343491 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 owes the current year Intangible Personal Property. Yes No

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

10. Name and Address of New Registered Agent
 81 Name
 82 Street Address (P.O. Box Number is Not Acceptable)
 83
 84 City **FL** 85 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	ASPLUNDH, CHRISTOPHER B	
STREET ADDRESS	3700 BUCK ROAD	
CITY-ST-ZIP	HUNTINGDON VALLEY PA 19006	
TITLE	V	<input checked="" type="checkbox"/> DELETE
NAME	ASPLUNDH, CARL H J JR	
STREET ADDRESS	PO BX 148, 2670 SUGAN RD	
CITY-ST-ZIP	SOLEBURG PA	
TITLE	V	<input checked="" type="checkbox"/> DELETE
NAME	ASPLUNDH, SCOTT M	
STREET ADDRESS	1222 FOREST HILL DRIVE	
CITY-ST-ZIP	LOWER GWYNEDD PA 19002	
TITLE	STD	<input type="checkbox"/> DELETE
NAME	DWYER, JOSEPH P	
STREET ADDRESS	419 SHOEMAKER WAY	
CITY-ST-ZIP	LANSDALE PA 19446	
TITLE	ASD	<input checked="" type="checkbox"/> DELETE
NAME	WARREN, GEORGE P JR.	
STREET ADDRESS	1407 FOX PLACE	
CITY-ST-ZIP	WEST CHESTER PA 19382	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	DWYER, JOSEPH P	
STREET ADDRESS	419 SHOEMAKER WAY	
CITY-ST-ZIP	LANSDALE PA	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
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		

14. 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 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: *[Signature]* 8/23/95 215-784-400

CR2E034 (5/99)

COMPASS EQUIPMENT LEASING, INC.

(Delaware Corporation)

F93000004468
610029-90002-31

OFFICERS

President	Brent D. Asplundh	1356 Meadowbrook Rd., Rydal, PA 19046
Vice President	Christopher B. Asplundh	3700 Buck Rd., Huntingdon Valley, PA 19006
Vice President	James A. Jennings III	108 Gwynmont Cr., North Wales, PA 19454
Secretary-Treasurer	Joseph P. Dwyer	419 Shoemaker Way, Lansdale, PA 19446
Asst. Secretary	Cyril P. Duricek, Jr.	233 Musket Circle, Lansdale, PA 19446

DIRECTORS

Christopher B. Asplundh	3700 Buck Rd., Huntingdon Valley, PA 19006
Joseph P. Dwyer	419 Shoemaker Way, Lansdale, PA 19446
Brent D. Asplundh	1356 Meadowbrook Rd., Rydal, PA 19046