

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

DOCUMENT # J40542 (9)

95 MAR 14 AM 8:37

1. Corporation Name
WALDEN LEASING, INC.

Principal Place of Business: **% C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324**

Mailing Address: **% C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: **10/28/1986** 3a. Date of Last Report: **02/23/1994**

2. Principal Place of Business: **9800 BACHMAN RD.** 2a. Mailing Address: **9800 BACHMAN RD.**

4. FEI Number: **59-2739048** Applied For: Not Applicable

22. State, Apt. #, etc.: **ORLANDO, FL.** 27. State, Apt. #, etc.: **ORLANDO, FL.**

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

23. City & State: **ORLANDO, FL.** 28. City & State: **ORLANDO, FL.**

6. Election Campaign Financing: **\$5.00 May Be Added to Fees**

24. Zip: **32824** 25. Country: **U.S.** 29. Zip: **32824** 30. Country: **U.S.**

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

9. Name and Address of Current Registered Agent
**CT CORPORATION SYSTEM
1200 S. 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: _____ 85. Zip Code: **FL**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits the 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.

12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
12.1 NAME	DPST HECKER, DENNIS E. 7825 WASH. AVE. SO., #500 MINNEAPOLIS MN	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.2 ADDRESS	V KEPHART, JOHN E. 7825 WASH. AVE. SO., #500 MINNEAPOLIS MN	1.2 NAME	
12.3 ADDRESS		1.3 STREET ADDRESS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.4 ADDRESS		1.4 CITY-ST-ZIP	
12.5 ADDRESS		2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.6 ADDRESS		2.2 NAME	
12.7 ADDRESS		2.3 STREET ADDRESS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.8 ADDRESS		2.4 CITY-ST-ZIP	
12.9 ADDRESS		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.10 ADDRESS		3.2 NAME	
12.11 ADDRESS		3.3 STREET ADDRESS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.12 ADDRESS		3.4 CITY-ST-ZIP	
12.13 ADDRESS		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.14 ADDRESS		4.2 NAME	
12.15 ADDRESS		4.3 STREET ADDRESS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.16 ADDRESS		4.4 CITY-ST-ZIP	
12.17 ADDRESS		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.18 ADDRESS		5.2 NAME	
12.19 ADDRESS		5.3 STREET ADDRESS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.20 ADDRESS		5.4 CITY-ST-ZIP	
12.21 ADDRESS		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.22 ADDRESS		6.2 NAME	
12.23 ADDRESS		6.3 STREET ADDRESS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.24 ADDRESS		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Sections 110.07(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. I am an officer or director of this corporation or the owner or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Book 12 or Book 13 of records, or upon attachment, with an address.

SIGNATURE: **JOHN E. KEPHART** **3/6/95** **612/944-7885**