

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED
Apr 30 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 620053 (9)
 1. Corporation Name
TANIS LEASING COMPANY



Principal Place of Business 666 PONDELLA RD N FT MYERS FL 33903 US	Mailing Address 757 N. ELDRIDGE HOUSTON TX 77079-4435
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2. Principal Place of Business 21 8607 Roberts Dr. Suite, Apt. #, etc. 22 City & State 23 Atlanta, GA Zip Country 24 30350 U.S.	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country 29
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3. Date Incorporated or Qualified 04/11/1979	3a. Date of Last Report 05/01/1996
4. FEI Number 59-1896611	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> 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
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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 _____ (Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent's signature required when resigning) DATE _____

12. OFFICERS AND DIRECTORS		
TITLE	P	<input checked="" type="checkbox"/> DELETE
NAME	CLARK, NEIL H JR.	
STREET ADDRESS	8607 ROBERTS DRIVE	
CITY-ST-ZIP	ATLANTA GA 30350	
TITLE	V	<input type="checkbox"/> DELETE
NAME	OLSON, WILLIAM H	
STREET ADDRESS	757 N. ELDRIDGE	
CITY-ST-ZIP	HOUSTON TX 77079	
TITLE	VSD	<input type="checkbox"/> DELETE
NAME	BURGER, GERALD K	
STREET ADDRESS	757 N. ELDRIDGE	
CITY-ST-ZIP	HOUSTON TX 77079	
TITLE	VT	<input type="checkbox"/> DELETE
NAME	LONG, RONALD E	
STREET ADDRESS	757 N. ELDRIDGE	
CITY-ST-ZIP	HOUSTON TX 77079	
TITLE	V	<input type="checkbox"/> DELETE
NAME	WISNIEWSKY, RICHARD L	
STREET ADDRESS	8607 ROBERTS DRIVE	
CITY-ST-ZIP	ATLANTA GA 30350	
TITLE	AS	<input type="checkbox"/> DELETE
NAME	SCHULER, EILEEN B	
STREET ADDRESS	757 N ELDRIDGE	
CITY-ST-ZIP	HOUSTON TX 77079	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
1.1 TITLE	President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	J. Frederick Snyder	
1.3 STREET ADDRESS	757 N. Eldridge	
1.4 CITY-ST-ZIP	Houston, TX 77079	
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	VP/AS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do 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

CR2E034 (9/96)