


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

FILED  
Mar 09 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 829524 (8) 1. Corporation Name UNITED STATES FLEET LEASING, INC.					
Principal Place of Business 250 CARPENTER FREEWAY IRVING TX 75062 US			Mailing Address P O BOX 660237 C/O CORPORATE TAX DEPT DALLAS TX 75266-0237 US		
2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 02/15/1973	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 94-1579328	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	
9. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301-2525				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)					
12. OFFICERS AND DIRECTORS					
TITLE	D	NAME	LONGENECKER, CHESTER D	<input type="checkbox"/> DELETE	
STREET ADDRESS			250 CARPENTER FREEWAY		
CITY-ST-ZIP			IRVING TX 75062		
TITLE	D	NAME	MANDICK, DENNIS	<input type="checkbox"/> DELETE	
STREET ADDRESS			250 CARPENTER FREEWAY		
CITY-ST-ZIP			IRVING TX 75062		
TITLE	DP	NAME	MARSHALL, HAROLD	<input type="checkbox"/> DELETE	
STREET ADDRESS			250 CARPENTER FREEWAY		
CITY-ST-ZIP			IRVING TX 75062		
TITLE	SS	NAME	HAYES, TIMOTHY M	<input type="checkbox"/> DELETE	
STREET ADDRESS			250 CARPENTER FREEWAY		
CITY-ST-ZIP			IRVING TX 75062		
TITLE	AVAS	NAME	GREENE, PATRICK	<input type="checkbox"/> DELETE	
STREET ADDRESS			250 CARPENTER FREEWAY		
CITY-ST-ZIP			IRVING TX 75062		
TITLE	EVPT	NAME	HUGHES, JOHN F	<input type="checkbox"/> DELETE	
STREET ADDRESS			250 CARPENTER FREEWAY		
CITY-ST-ZIP			IRVING TX 75062		
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
<input type="checkbox"/> Change <input type="checkbox"/> Addition					
1.1 TITLE					
1.2 NAME					
1.3 STREET ADDRESS					
1.4 CITY-ST-ZIP					
2.1 TITLE					
2.2 NAME					
2.3 STREET ADDRESS					
2.4 CITY-ST-ZIP					
3.1 TITLE					
3.2 NAME					
3.3 STREET ADDRESS					
3.4 CITY-ST-ZIP					
4.1 TITLE					
4.2 NAME					
4.3 STREET ADDRESS					
4.4 CITY-ST-ZIP					
5.1 TITLE					
5.2 NAME					
5.3 STREET ADDRESS					
5.4 CITY-ST-ZIP					
6.1 TITLE					
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 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 liquidator of the corporation; that my 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 to this report.					
SIGNATURE: _____ PATRICK J. GREENE ASS'T VICE PRESIDENT & ASS'T SECRETARY 2/28/98					

CP2E034 (10/97)