2006 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # J88731

1. Entity Name
GENERAL EQUIPMENT LEASING CORPORATION

Principal Place of Business	Mailing Address
1111 N WESTSHORE BLVD STE 211 TAMPA, FL 33607 US	1111 N WESTSHORE BLVD. STE 211 TAMPA, FL 33607 US

DO NOT WRITE IN THIS SPACE

07032006   No Chg-P   CR2E034 (11/05)

4. FEI Number NOT APPLICABLE	Applied For
	Not Applicable

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

6. Name and Address of Current Registered Agent

MOSELEY, WAYNE
1111 N WESTSHORE BLVD
STE 211
TAMPA, FL 33607

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IN THIS SPACE

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. I am familiar with, and accept the obligations of registered agent.

U00000568987
07/11/06-80007-014 150.00

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

FILE NOW!!! FEE IS $150.00 Due by September 6, 2006	**9.** Election Campaign Financing Trust Fund Contribution ☐	**$5.00** May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	DP
NAME	MOSELEY, WAYNE J
STREET ADDRESS	1111 N WESTSHORE BLVD., STE 211
CITY-ST-ZIP	TAMPA, FL 33607
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE
IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE: _____ Director and President 7/3/06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone # 813 242-4011