SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: $550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $750).

FILED
Oct 08 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 # 829843 (2)

1. Corporation Name
T.R. & G. LEASING CORPORATION

Principal Place of Business
18 THIRD STREET
BIGLERVILLE PA 17307

Mailing Address
18 THIRD STREET
BIGLERVILLE PA 17307

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
04/05/1973

4. FEI Number
34-1057550
Applied For / 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 or has paid the current year Intangible Personal Property Tax due June 30 [ ] Yes [ ] No

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

9. Name and Address of Current Registered Agent
MOSS,MARVIN I., P.A.
20001 BISCAYNE BLVD.
SUITE 506
AVENTURA FL 33180-1430

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 registered agent is changed) DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	[ ] DELETE
NAME	GERHART, PHYLLIS T	
STREET ADDRESS	6515 ANNO AVE	
CITY ST ZIP	ORLNADO, FL 00000	
TITLE	VSTD	[ ] DELETE
NAME	ELLIS, GRETCHEN G.	
STREET ADDRESS	6515 ANNO AVE	
CITY ST ZIP	ORLANDO FL	
TITLE	V	[ ] DELETE
NAME	MILLER, BETH	
STREET ADDRESS	6515 ANNO AVE	
CITY ST ZIP	ORLANDO FL	
TITLE	V	[X] DELETE
NAME	GERHART, H.M. III	
STREET ADDRESS	6515 ANNO AVE	
CITY ST ZIP	ORLANDO FL 32809	
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY ST ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY ST ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE		[ ] Change [ ] Addition
12 NAME		
13 STREET ADDRESS		
14 CITY ST ZIP		
21 TITLE		[ ] Change [ ] Addition
22 NAME		
23 STREET ADDRESS		
24 CITY ST ZIP		
31 TITLE		[ ] Change [ ] Addition
32 NAME		
33 STREET ADDRESS		
34 CITY ST ZIP		
41 TITLE		[ ] Change [ ] Addition
42 NAME		
43 STREET ADDRESS		
44 CITY ST ZIP		
51 TITLE		[ ] Change [ ] Addition
52 NAME		
53 STREET ADDRESS		
54 CITY ST ZIP		
61 TITLE		[ ] Change [ ] Addition
62 NAME		
63 STREET ADDRESS		
64 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 a director 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: Gretchen G. Ellis 7/28/98 717-677-8070

CR2E034 5-98