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

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 837124 (7)

WLC LEASING COMPANY

Mailing Address

FILED

Jan 22 1997 8:00am

Secretary of State

ROUTE 202 SOUTH P O BOX 933 CONCORDVILLE PA 19331		ROUTE 202 SOUTH P O BOX 933 CONCORDVILLE PA 18331-0933		Date Incorporated or Qualified 10/01/1976	ate of Last R	of Last Report 2/1996		
Principal Place of Business 2a, Mailing Address					4. FEI Number	Applied For		
21		26		·····	23-1529898			t Applicable
Suite, Apt #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired		\$8.75 Additional Fee Required	
City & State		City & State		Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees		
Zip 24	25 29		Country 30	<i>t</i>	8. This corporation has liability for intangible tax under s. 199 032, Florida Statutes			
	9. Name and Address of Curre	ent Registered Agent			10. Name and Address of New R	egistered .	Agent	
	CORPORATION SYSTEM		81	Name				
1200 S. PINE ISLAND ROAD PLANTATION FL 33324			82	82 Street Address (P.O. Box Number is Not Acceptable)				
. –			83					
			84	City		FL	85 Zip (Code
SIGNATURE	Signature typing or principlinating of registured a	agent and little d'applicable (Ni	OTE. Registered Aç		ation's board of directors. I hereby acce	DATE		
12.	OFFICERS A	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFI	ICERS AND		
TITLE	WATKINS, DWAIN J.	DELETE	1.1 TITLE		PRES.	E.	L. Change	Addition
NAME STREET ADDRESS	RTE 202		1.2 NAME	T ADDRESS	LIATKINS, GEORIFE ROUTE 202 S.			
CITY-ST-ZIP	CONCORDVILLE PA		1.4 CITY-		CONCORDYTUE, PA	433	,	
TITLE	ST	DELETE	2.1 TITLE	01-E			Change	Addition
NAME	JAKUBOWSKI, DANIEL		2.2 NAME					
STREET ADORESS	RTE 202 SOUTH		2.3 STREE	T ADDRESS	in the second se			
CITY - ST - ZIP	CONCORDVILLE PA	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	2. 4 CITY	ST-ZIP			···	
TITLE	GM HARRIS, MAUDE J	L DELETE	3.1 TITLE				Change	Addition
NAME	RTE 202 SOUTH		3.2 NAME					
STREET ADDRESS	CONCORDVILLE PA		3.4. CITY	T ADDRESS				
CITY+ ST- ZIP TITLE		DELETE	4.1 TITLE	\$1-ZIP			Change	Addition
NAME			4. 2 NAMI	: 1			•	
STREET ADDRESS			4.3 STREE	T ADDRESS				
CITY-ST-7/P			4.4 CITY-	ST-ZIP				
TITLE		DELETE	5.1 TITLE				☐ Change	Addition
NAME:			5.2 NAME					
STREET ADDRESS				T ADDRESS				
CITY-S1-ZIP		Drugge	5.4 CITY -	ST-ZIP			Change	Addition
TITLE		☐ DELETE	6.1 TITLE				Cisarde	L AUGINON
NAME			6.2 NAME					
STREET ADDRESS			6.3 STREE	T ADDRESS				
CHITCHEATTE								

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.

NIEL R. JAKUBOWSKI

610-558-0400

Daytime Phone #