

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 850818

FILED
Apr 28, 2008
Secretary of State

Entity Name: BANKERS LEASING CORPORATION

Current Principal Place of Business:

450 MAMARONECK AVE
HARRISON, NY 10528 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 31226
TAMPA, FL 33612 US

New Mailing Address:

PO BOX 30509
TAMPA, FL 33612 US

FEI Number: 04-2210665

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MATUTE, LUIS
Address: 666 5TH AVE
City-St-Zip: NEW YORK, NY 10103

Title: VP () Delete
Name: MANION, JOHN
Address: 909 3RD AVE
City-St-Zip: NEW YORK, NY 10022

Title: VPAC () Delete
Name: VARADE, ALAN F
Address: 450 MAMA ROECK AVE
City-St-Zip: HARRISON, NY 10528

Title: TD (X) Delete
Name: HOLM, KRISTEN
Address: 450 MAMARONECK AVE
City-St-Zip: HARRISON, NY 10528

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MOHIDEN-PLUMMER, WAHIDA
Address: 388 GREENWICH
City-St-Zip: NEW YORK, NY 10013

Title: VPDT (X) Change () Addition
Name: HALL, BRUCE
Address: 450 MAMARONECK AVE
City-St-Zip: HARRISON, NY 10528

Title: S (X) Change () Addition
Name: JOVAN, ROBERT
Address: 3950 REGENT
City-St-Zip: IRVING, TX 75063

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LISA A HOFFMAN

AVP

04/28/2008

Electronic Signature of Signing Officer or Director

Date