

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 852372

FILED
Apr 25, 2010
Secretary of State

Entity Name: PENSKE TRUCK LEASING CORPORATION

Current Principal Place of Business:

RT. 10 - GREEN HILLS
READING, PA 19607

New Principal Place of Business:

Current Mailing Address:

RT. 10 - GREEN HILLS
P O BOX 1321
READING, PA 196031321

New Mailing Address:

FEI Number: 22-2391240 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: AS
Name: DUFF, MICHAEL A
Address: RT 10 GREEN HILLS
City-St-Zip: READING, PA 19607

Title: VPT
Name: ANGELBECK, WAYNE S
Address: RT 10 GREEN HILLS
City-St-Zip: READING, PA 19607

Title: PD
Name: HARD, BRIAN
Address: RT. 10 - GREEN HILLS
City-St-Zip: READING, PA 19607

Title: D
Name: PENSKE, ROGER S
Address: 2555 TELEGRAPH RD
City-St-Zip: BLOOMFIELD HILLS, MI 48302

Title: SRVP
Name: COCUZZA, FRANK
Address: RT. 10 - GREEN HILLS
City-St-Zip: READING, PA 19607

Title: D
Name: CZARNECKI, WALTER
Address: 2555 TELEGRAPH RD
City-St-Zip: BLOOMFIELD HILLS, MI 48302

I hereby 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 all other like empowered.

SIGNATURE: WAYNE S ANGELBECK

VPT

04/25/2010

_____ Electronic Signature of Signing Officer or Director

_____ Date