

2007 FOR PROFIT CORPORATION  
ANNUAL REPORT

**FILED**  
**May 01, 2007 8:00 am**  
**Secretary of State**

05-01-2007 90035 029 \*\*\*150.00

**DOCUMENT # 857414**

1. Entity Name  
**LEWISTON LEASING CORPORATION**



Principal Place of Business  
**C/O MORGAN STANLEY DEAN WITTER & CO  
1585 BROADWAY  
NEW YORK, NY 10036**

Mailing Address  
**C/O VAN KAPEN INVESTMENTS INC  
1 PARKVIEW PLAZA PO BOX 5555  
OAKBROOK TERRACE, IL 60181-5555**

40095796



04202007 Chg-P CR2E034 (12/06)

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number  
**13-3165462**

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

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

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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.

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  
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE VD ☐ Delete  
NAME O'SHAUGHNESSY, WILLIAM J.  
STREET ADDRESS 1221 AVENUE OF THE AMERICAS  
CITY-ST-ZIP NEW YORK, NY 10020

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE V ☐ Delete  
NAME SANDBERG, BRUCE  
STREET ADDRESS 750 7TH AVE.  
CITY-ST-ZIP NEW YORK, NY 10019

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE PD ☐ Delete  
NAME HAHN, JEFFREY  
STREET ADDRESS 195 BROADWAY  
CITY-ST-ZIP NEW YORK, NY 10006

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE S ☐ Delete  
NAME TYLER IV, JACOB E  
STREET ADDRESS 1221 AVENUE OF THE AMERICAS  
CITY-ST-ZIP NEW YORK, NY 10020

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE T ☒ Delete  
NAME FORSELL, WILLIAM J.  
STREET ADDRESS 750 SEVENTH AVE.  
CITY-ST-ZIP NEW YORK, NY 10019

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE V ☐ Delete  
NAME MARMOLL, ERIC J.  
STREET ADDRESS 1 PARKVIEW PLAZA, P.O. BOX 5555  
CITY-ST-ZIP OAKBROOK TERRACE, IL 60181

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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:

*Eric J. Marmoll*

Eric J. Marmoll

4/24/2007

(630) 684-6140

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #