


2004 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # F0000006931 1. Entity Name ENN LEASING COMPANY, INC.	
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FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATION

04 OCT 20 AM 11:55

Principal Place of Business 7700 WOLF RIVER BOULEVARD GERMANTOWN, TN 38138	Mailing Address 7700 WOLF RIVER BOULEVARD GERMANTOWN, TN 38138
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2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country	3. Mailing Address Suite, Apt. #, etc. City & State Zip Country
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00082004 Chg-P CR2E034 (10/03)

4. FEI Number 62-1835188	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent C.T. CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Amended AR is \$61.25	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	CD MCNEILL, PHILLIP H SR. <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	7700 WOLF RIVER BOULEVARD	NAME	
STREET ADDRESS	GERMANTOWN, TN 38138	STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	P <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SILVER, HOWARD A	NAME	
STREET ADDRESS	7700 WOLF RIVER BOULEVARD	STREET ADDRESS	
CITY-ST-ZIP	GERMANTOWN, TN 38138	CITY-ST-ZIP	
TITLE	VSTD <input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	DEMPSEY, DONALD H	NAME	
STREET ADDRESS	7700 WOLF RIVER BOULEVARD	STREET ADDRESS	
CITY-ST-ZIP	GERMANTOWN, TN 38138	CITY-ST-ZIP	
TITLE	VAST <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	COOPER, J. RONALD	NAME	
STREET ADDRESS	7700 WOLF RIVER BOULEVARD	STREET ADDRESS	
CITY-ST-ZIP	GERMANTOWN, TN 38138	CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

600042392776
 11/02/04--01018--003 **\$61.25

12. 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 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: *Ronald J. Cooper* 10-11-04 901-754-7774
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #