

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000003871

FILED
Jan 23, 2008
Secretary of State

Entity Name: GREATAMERICA LEASING CORPORATION

Current Principal Place of Business:

625 FIRST ST SE
CEDAR RAPIDS, IA 52401

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 609
CEDAR RAPIDS, IA 524060609

New Mailing Address:

FEI Number: 42-1425592

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 32301 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: D () Delete
Name: GOLOBIC, ANTON
Address: 625 FIRST STREET SE
City-St-Zip: CEDAR RAPIDS, IA 52401

Title: D () Delete
Name: OLSON, DOUG
Address: 625 FIRST STREET SE
City-St-Zip: CEDAR RAPIDS, IA 52401

Title: D () Delete
Name: SCHERRMAN, EMMETT
Address: 702 BEAVER RIDGE CT SE
City-St-Zip: CEDAR RAPIDS, IA 52403

Title: D () Delete
Name: RHINES, PAUL
Address: 118 THIRD AVE SE SUITE 837
City-St-Zip: CEDAR RAPIDS, IA 52401

Title: O () Delete
Name: GOEDKEN, JEFF
Address: 625 FIRST STREET SE
City-St-Zip: CEDAR RAPIDS, IA 52401

Title: D () Delete
Name: SEDLACEK, DOUGLAS
Address: 2250 COUNTRY CLUB PARKWAY
City-St-Zip: CEDAR RAPIDS, IA 52403

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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: JEFF GOEDKEN

O

01/23/2008

Electronic Signature of Signing Officer or Director

Date