FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 MAY -1 PM 1:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F94000004093 (O)

1. Corporation Name

ERVIN LEASING COMPANY

Principal Place of Business
3300 WASHTENAW. #230
ANN ARBOR MI 48104

Mailing Address
3300 WASHTENAW. #230
ANN ARBOR MI 48104

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business — 21 — Suite, Apt. #, etc. 22 — City & State 23 — Zip 24 — Country 25

2a. Mailing Address — 26 — Suite, Apt. #, etc. 27 — City & State 28 — Zip 29 — Country 30

3. Date Incorporated or Qualified: 08/08/1994
3a. Date of Last Report:

4. FEI Number: 38-2833066 ☐ Applied For ☐ Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032 Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	TITLE	☐ Change ☐ Addition
NAME	GAFFNEY, D B	NAME	
STREET ADDRESS	3300 WASHTENAW, SUITE 230	STREET ADDRESS	
CITY-ST-ZIP	ANN ARBOR MI 48104	CITY-ST-ZIP	
TITLE	SD	TITLE	☑ Change ☐ Addition
NAME	SARDONE, VINCENT P	NAME	
STREET ADDRESS	3892 RESEARCH PARK DR.	STREET ADDRESS	DELETE
CITY-ST-ZIP	ANN ARBOR MI 48104	CITY-ST-ZIP	
TITLE	T	TITLE	SECRETARY / TREASURER ☑ Change ☐ Addition
NAME	CONZELMANN, THOMAS J	NAME	
STREET ADDRESS	3300 WASHTENAW, #230	STREET ADDRESS	
CITY-ST-ZIP	ANN ARBOR MI 48104	CITY-ST-ZIP	
TITLE	D	TITLE	☐ Change ☐ Addition
NAME	PEARSON, JOHN E	NAME	
STREET ADDRESS	3893 RESEARCH PARK DR.	STREET ADDRESS	
CITY-ST-ZIP	ANN ARBOR MI 48108	CITY-ST-ZIP	
TITLE	D	TITLE	DIRECTOR ☑ Change ☐ Addition
NAME	REARSALL, DENNIS	NAME	WILLIAM H. RHODANBERGER
STREET ADDRESS	1 GREAT LAKES PLAZA	STREET ADDRESS	3893 RESEARCH PARK DR.
CITY-ST-ZIP	ANN ARBOR MI 48104	CITY-ST-ZIP	ANN ARBOR, MI 48108
TITLE	D	TITLE	☐ Change ☐ Addition
NAME	KATO, ALEX	NAME	
STREET ADDRESS	1 GREAT LAKES PLAZA	STREET ADDRESS	
CITY-ST-ZIP	ANN ARBOR MI 48104	CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [signature] SEC/TREAS. 5-1-95 (313)677-9400

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0478608 FP