

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000004624

Entity Name: IRWIN LEASING CORP.

FILED
Jan 28, 2004
Secretary of State

Current Principal Place of Business:

500 WASHINGTON ST.
COLUMBUS, IN 47201

New Principal Place of Business:

Current Mailing Address:

500 WASHINGTON ST.
COLUMBUS, IN 47201

New Mailing Address:

FEI Number: 35-1791853

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 PINE ISLAND BLVD.
PLANTATION, FL 33324 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: LITTRELL, JODY A
Address: 500 WASHINGTON ST.
City-St-Zip: COLUMBUS, IN 47201

Title: AS () Delete
Name: MUFSON, ELLEN Z
Address: 500 WASHINGTON ST.
City-St-Zip: COLUMBUS, IN 47201

Title: S () Delete
Name: SOUZA, MATTHEW F
Address: 500 WASHINGTON ST.
City-St-Zip: COLUMBUS, IN 47201

Title: D () Delete
Name: MILLER, WILLIAM
Address: 500 WASHINGTON ST.
City-St-Zip: COLUMBUS, IN 47201

Title: D () Delete
Name: WASHBURN, THOMAS D
Address: 500 WASHINGTON ST.
City-St-Zip: COLUMBUS, IN 47201

Title: () Delete
Name:
Address:
City-St-Zip:

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
Name:
Address:
City-St-Zip:

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

Title: P () Change (X) Addition
Name: DAVIS, CLAUDE E
Address: 500 WASHINGTON ST.
City-St-Zip: COLUMBUS, IN 47201

I hereby certify that the information supplied with this filing does not qualify for the 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 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: MATTHEW F. SOUZA

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01/28/2004

Electronic Signature of Signing Officer or Director

Date