

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

1996 2-9-96 B-958 NC

DOCUMENT # F95000002942 (9)

1. Corporation Name

SIGNET BUSINESS LEASING CORPORATION



Principal Place of Business

Mailing Address

701 E. FRANKLIN STREET
RICHMOND VA 23285

701 E. FRANKLIN STREET
RICHMOND VA 23285

3. Date Incorporated or Qualified
06/19/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

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

Signature typed or printed name of registered agent and the applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME WRIGHT, DAVID LEE C
STREET ADDRESS 701 EAST FRANKLIN STREET
CITY-STATE-ZIP RICHMOND VA 23285

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY-STATE-ZIP

TITLE V
NAME BAUMGARDNER, SHEILA LYNNE
STREET ADDRESS 701 EAST FRANKLIN STREET
CITY-STATE-ZIP RICHMOND VA 23285

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY-STATE-ZIP

TITLE SD
NAME WILSON, SARA REDDING
STREET ADDRESS 7 N. 8TH STREET
CITY-STATE-ZIP RICHMOND VA 23280

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-STATE-ZIP

TITLE T
NAME DUTY, GLEN L
STREET ADDRESS 7 N. 8TH STREET
CITY-STATE-ZIP RICHMOND VA 23280

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-STATE-ZIP

TITLE D
NAME LOEBER, JOHN S
STREET ADDRESS 7 SAINT PAUL STREET
CITY-STATE-ZIP BALTIMORE MD 21202

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-STATE-ZIP

TITLE D
NAME TROUT, KENNETH H
STREET ADDRESS 7 SAINT PAUL STREET
CITY-STATE-ZIP BALTIMORE MD 21202

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-STATE-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)(k), 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, changed, or on an attachment with an address.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

CR2E034 (12/95)