2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000003476

Entity Name: SERENDIPITY LEASING CORPORATION

FILED May 30, 2006 Secretary of State

	OLKLINE	on the EEA Convo Corta Croxin	314		
Current Principal Place of Business:			New Principal Place of Business:		
	DISON AVENU CITY, MO 641				
Current Mailing Address:			New Mailing Address:		
	DISON AVENU CITY, MO 641				
FEI Number	: 52-1984661	FEI Number Applied For ()	FEI Number Not App	Olicable () Certificate of Status Desired ()	
Name and	d Address of (Current Registered Agent:	Name and	d Address of New Registered Agent:	
1200 SOU	PORATION SY ITH PINE ISLA ION, FL 3332	ND ROAD			
	e named entity e of Florida.	submits this statement for the p	ourpose of changing i	its registered office or registered agent, or both	
SIGNATU	RE:				
	Electro	nic Signature of Registered Age	ent	Date	
Election Ca	mpaign Financin	g Trust Fund Contribution ().			
OFFICER	S AND DIREC	CTORS:	ADDITION	NS/CHANGES TO OFFICERS AND DIRECTO	
Title: Name: Address: City-St-Zip:	T (LUNSFORD, L 4600 MADISOI KANSAS CITY	N, SUITE 1500	Title: Name: Address: City-St-Zip:	T (X) Change () Addition KERNER, CHARLOTTE 4600 MADISON, SUITE 1500 KANSAS CITY, MO	
Title: Name: Address: City-St-Zip:	HART, JANE E	NSAS CITY PLACE, 1200 MAIN	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	KOHN, HERBE	NSAS CITY PLACE 1200 MAIN	Title: Name: Address: City-St-Zip:	()Change()Addition	
Title: Name: Address: City-St-Zip:	P (BERSTEIN, RO 4600 MADISOI KANSAS CITY	N, SUITE 1500	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP (BERNSTEIN, S 4600 MADISOI KANSAS CITY	N, SUITE 1500	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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: PATRICIA A. BYRNES, CONTROLLER CONT 05/30/2006