2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000114458

Title:

Name:

Title:

Name:

Address:

City-St-Zip:

Address:

City-St-Zip:

Entity Name: HENNESSEY CAPITAL LEASING, LLC.

() Delete

() Delete

FILED Jul 26, 2009 Secretary of State

() Change (X) Addition

() Change (X) Addition

STRUTNYSKI, JOSEPH

TAMPA, FL 33610

CARROLL, JULIE

287 AUBURN STREET

NEWTON, MA 02466

6810 SPENCER CIRCLE

Current Principal Place of Business:	New Principal Place of Business:
6810 SPENCER CIRCLE TAMPA, FL 33610	304 PLANT AVENUE TAMPA, FL 33607
Current Mailing Address:	New Mailing Address:
6810 SPENCER CIRCLE TAMPA, FL 33610	PO BOX 2601 TAMPA, FL 33601
FEI Number: 55-0909875 FEI Number Applied For () FEI Num In accordance with s. 607.193(2)(b), F.S., the limited liability company did i	nber Not Applicable () Certificate of Status Desired () not receive the prior notice.
Name and Address of Current Registered Agent:	Name and Address of New Registered Agent:
WOLF, F. DAVID 6810 SPENCER CIRCLE TAMPA, FL 33610 US	POWELL, MATTHEW D 304 PLANT AVENUE TAMPA, FL 33607 US
The above named entity submits this statement for the purpose o in the State of Florida.	f changing its registered office or registered agent, or both,
SIGNATURE: MATTHEW D POWELL	07/26/2009
Electronic Signature of Registered Agent	Date
MANAGING MEMBERS/MANAGERS:	ADDITIONS/CHANGES:
Title: MGR () Delete Name: WOLF, F. DAVID Address: 6810 SPENCER CIRCLE City-St-Zip: TAMPA, FL 33610	Title: MGR (X) Change () Addition Name: HENNESSEY, FRANK Address: 287 AUBURN STREET City-St-Zip: NEWTON, MA 02466 US

Title:

Name:

Title:

Name:

Address:

City-St-Zip:

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: FRANK HENNESSEY MGR 07/26/2009