2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000056394

Entity Name: LYNCH LEASING, LLC

2165 RIVER BLVD.

JACKSONVILLE, FL 32204

Address:

City-St-Zip:

FILED Mar 10, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 2165 RIVER BLVD JACKSONVILLE, FL 32204 LIS **Current Mailing Address: New Mailing Address:** 2165 RIVER BLVD JACKSONVILLE, FL 32204 US FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MEINERS, LOUIS M JR 3073 HORSESHOE DRIVE SOUTH SUITE 210 NAPLES, FL 34104 US 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 MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM () Delete Title: () Change () Addition LYNCH MANAGEMENT COM, PANY Name: Name: Address: 2165 RIVER BLVD Address: City-St-Zip: JACKSONVILLE, FL 32204 US City-St-Zip: Title: VΡ () Delete Title: () Change () Addition LYNCH, ROBERT P Name: Name: Address: 2165 RIVER BLVD. Address: City-St-Zip: JACKSONVILLE, FL 32204 City-St-Zip: Title: () Delete Title: () Change () Addition LYNCH, WILLIAM B Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: ROBERT P. LYNCH VP 03/10/2008