

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000067876

FILED
Apr 20, 2009
Secretary of State

Entity Name: GLOBAL LEASING ENTERPRISES LLC

Current Principal Place of Business:

4400 COMMERCE CIRCLE S.W.
ATLANTA, GA 30336

New Principal Place of Business:

Current Mailing Address:

4400 COMMERCE CIRCLE S.W.
ATLANTA, GA 30336

New Mailing Address:

FEI Number: 33-1170125

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

RESEARCHER'S ASSOCIATES, INC.
633 TIMBERLANE ROAD
TALLAHASSEE, FL 32312 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

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: TRAYLOR, MARK R
Address: 2712 PINEBLOOM WAY
City-St-Zip: DULUTH, GA 30097

Title: MGRM () Delete
Name: GRANT, DONALD J
Address: 3376 TRIVIEW SQUARE
City-St-Zip: ATLANTA, GA 30339

Title: MGRM () Delete
Name: HARBAUGH, KENNETH A
Address: 1000 OVERLOOK DRIVE
City-St-Zip: VILLA RICA, GA 30180

ADDITIONS/CHANGES:

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

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

Title: MGRM (X) Change () Addition
Name: HARBAUGH, KENNETH A
Address: 100 GULF SHORE DRIVE, UNIT 309
City-St-Zip: DESTIN, FL 32541

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: MARK R. TRAYLOR

MGRM

04/20/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date