2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L52887

Entity Name: TRIANGLE LEASING OF FLORIDA, INC.

FILED Apr 22, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
3800 N. RC STE 301	DNEY PARHAN	/I RD			
	CK, AR 72212	US			
Current Mailing Address:			New Mailing Address:		
3800 N. RODNEY PARHAM RD STE 301					
	CK, AR 72212	US			
FEI Number:	56-1728337	FEI Number Applied For ()	FEI Number Not Appli	licable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:		
SUITE 4	/ICES, INC. :UTIVE PARK DI FL 33331 US	RIVE			
The above in the State		omits this statement for the purp	oose of changing it	its registered office or registered agent, or both,	
SIGNATUR					
Electronic Signature of Registered Agent				Date	
Election Cam	paign Financing T	rust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	PDS () De CLAIR, RICHARD 3800 N. RODNEY LITTLE ROCK, AR	C PARHAM RD SUITE 301	Title: Name: Address: City-St-Zip:	P (X) Change () Addition CLAIR, RICHARD C 6508 MIAMI BLUFF DRIVE MARIEMONT, OH 45227	
Title: Name: Address: City-St-Zip:	CEO () De CLAIR, RICAHRD 3800 N. RODNEY LITTLE ROCK, AR	C PARHAM RD SUITE 301	Title: Name: Address: City-St-Zip:	S (X) Change () Addition BACHMAN, DAVID R 2216 HUNTLEIGH COURT LITTLE ROCK, AR 72212	
Title: Name: Address: City-St-Zip:	CAO () De HULL, JANICE 3800 N. RODNEY LITTLE ROCK, AR	PARHAM RD SUITE 301	Title: Name: Address: City-St-Zip:	CAO (X) Change () Addition HULL, JANICE 416 N. DEVON SHERWOOD, AR 72120	
Title: Name: Address: City-St-Zip:	() De	elete	Title: Name: Address: City-St-Zip:	D () Change (X) Addition TAURA, DENIS J 90 MONTADLE DRIVE PRINCETON, NJ 08540	
Title: Name: Address: City-St-Zip:	() De	elete	Title: Name: Address: City-St-Zip:	D () Change (X) Addition WILLIAMS, JOHN Y 3399 PEACHTREE RD. NE, STE 1790 ATLANTA, GA 30326	

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 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: JANICE HULL CAO 04/22/2009