

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M01000002677

FILED  
Feb 21, 2007  
Secretary of State

Entity Name: XEROX LEASE EQUIPMENT LLC

**Current Principal Place of Business:**

800 LONG RIDGE RD., MAIL STOP 2-4-B9  
STAMFORD, CT 06904

**New Principal Place of Business:**

**Current Mailing Address:**

800 LONG RIDGE RD., MAIL STOP 2-4-B9  
STAMFORD, CT 06904

**New Mailing Address:**

FEI Number: 06-1632264

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 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: MGR ( ) Delete  
Name: RIVERA, JOHN F  
Address: 800 LONG RIDGE RD.  
City-St-Zip: STAMFORD, CT 069041600

Title: MGR ( ) Delete  
Name: SEEGAL, RHONDA L  
Address: 800 LONG RIDGE RD.  
City-St-Zip: STAMFORD, CT 06904

Title: MGR ( ) Delete  
Name: HARRISON, RICHARD  
Address: 470 EXCHANGE ST.  
City-St-Zip: GENEVA, NY 144560353

Title: S ( ) Delete  
Name: LEE, SAMUEL K  
Address: 800 LONG RIDGE ROAD  
City-St-Zip: STAMFORD, CT 06904

Title: AS ( ) Delete  
Name: SHEIVACHMAN, MARK  
Address: 800 LONG RIDGE ROAD  
City-St-Zip: STAMFORD, CT 06904

**ADDITIONS/CHANGES:**

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

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

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

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

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

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 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: JOHN F. RIVERA

MGR

02/21/2007

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