


**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 04, 2004 08:00 AM
Secretary of State

DOCUMENT # M03000000150 1. Entity Name EBY-BROWN LEASING, LLC	
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Principal Place of Business 280 WEST SHUMAN BLVD. SUITE 280 NAPERVILLE, IL 60566	Mailing Address 280 WEST SHUMAN BLVD. SUITE 280 NAPERVILLE, IL 60566
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DO NOT WRITE IN THIS SPACE



01132004 No Chg-LLC CR2E083 (10/03)

4. FEI Number 36-4470659	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

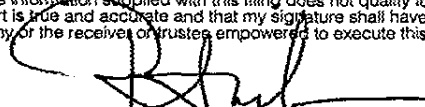
6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525
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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>
DATE _____

Filing Fee is \$50.00 Due by May 1, 2004

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR WAKE, RICHARD W 280 WEST SHUMAN BLVD. NAPERVILLE, IL 60566
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR WAKE, THOMAS G 280 WEST SHUMAN BLVD. NAPERVILLE, IL 60566
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<p>U00000023701 02/02/02-80001-022 50.00</p> <p>U00000028914 02/04/04-80042-022 50.00</p> DO NOT WRITE IN THIS SPACE
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:  Richard W Wake 1/23/04 (630)778-2800
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>
<small>Date</small> 1/23/04 <small>Daytime Phone #</small> (630)778-2800