

**FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00**

**FILED**  
**Apr 25 1997 8:00am**  
**Secretary of State**

**PROFIT CORPORATION ANNUAL REPORT 1997**



FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**  
 Secretary of State  
 DIVISION OF CORPORATIONS

**DOCUMENT # P05390 (0)**  
 1. Corporation Name  
**AVCO LEASING SERVICES, INC.**



Principal Place of Business: **600 ANTON BLVD. COSTA MESA CA 92626-7147**  
 Mailing Address: **600 ANTON BLVD. COSTA MESA CA 92626-7147**

3. Date Incorporated or Qualified: **03/22/1985**      3a. Date of Last Report: **04/29/1996**  
 4. FEI Number: **95-3205805**      Applied For:  Not Applicable  
 5. Certificate of Status Desired:  **\$8.75 Additional Fee Required**  
 6. Election Campaign Financing Trust Fund Contribution:  **\$5.00 May Be Added to Fees**  
 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes:  Yes  No

2. Principal Place of Business: **21** Suite, Apt. #, etc.: **22** **Costa Mesa, CA 92628-5011**  
 2a. Mailing Address: **26** **P.O. Box 5011**  
 Suite, Apt. #, etc.: **27** **ATTN: TAX DEPT.**  
 City & State: **28** **Costa Mesa, CA 92628-5011**  
 Zip: **29** Country: **30**

9. Name and Address of Current Registered Agent  
**UNITED STATES CORPORATION COMPANY**  
**1201 HAYS STREET**  
**SUITE 105**  
**TALLAHASSEE FL 32301**

10. Name and Address of New Registered Agent  
 61 Name  
 62 Street Address (P.O. Box Number is Not Acceptable)  
 63  
 64 City **FL** 65 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SCHIMBOR, MARK A	1.2 NAME	
STREET ADDRESS	600 ANTON BLVD.	1.3 STREET ADDRESS	
CITY-ST-ZIP	COSTA MESA CA 92626-7147	1.4 CITY-ST-ZIP	
TITLE	VP	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HITZEL, T.G.	2.2 NAME	
STREET ADDRESS	600 ANTON BLVD	2.3 STREET ADDRESS	
CITY-ST-ZIP	COSTA MESA CA 92626-7147	2.4 CITY-ST-ZIP	
TITLE	VCD	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FITE, GARY	3.2 NAME	
STREET ADDRESS	600 ANTON BLVD.	3.3 STREET ADDRESS	
CITY-ST-ZIP	COSTA MESA CA 92626-7147	3.4 CITY-ST-ZIP	
TITLE	VSD	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SMITH, HERBERT F.	4.2 NAME	
STREET ADDRESS	600 ANTON BLVD.	4.3 STREET ADDRESS	
CITY-ST-ZIP	COSTA MESA CA 92626-7147	4.4 CITY-ST-ZIP	
TITLE	V	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BUKOW, RON	5.2 NAME	
STREET ADDRESS	600 ANTON BLVD.	5.3 STREET ADDRESS	
CITY-ST-ZIP	COSTA MESA CA 92626-7147	5.4 CITY-ST-ZIP	
TITLE	VP	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HITZEL, T.G.	6.2 NAME	
STREET ADDRESS	600 ANTON BLVD.	6.3 STREET ADDRESS	
CITY-ST-ZIP	COSTA MESA CA 92626-7147	6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **4-11-97 (714) 445-7845**

CR2E034 (9/96)