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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

Onefirst National Plaza

Country

81 Name

	•		
DOCUMEN 1, Corporation Name	JT #	P090	22

Country

9. Name and Address of Current Registered Agent

SIGNATURE: Sural KOPLETURE REQUIRED

OR PRINTED NAME OF BIGNING OFFICER OR DIRECTOR

25

CT CORPORATION SYSTEM

(5)

NBD LEASING, INC.

-			٠,

Principal Place of Business

ONE INDIANA SQUARE #1017
INDIANAPOLIS IN 46266

2. Principal Place of Business

Suite, Apl. #, etc.

City & State

21

22

23

24

Zio

Mailing Address

ONE INDIANA SQUARE #1017

2a. Mailing Address

29

INDIANAPOLIS IN 46266

FILED May 01 1997 8:00am Secretary of State



3a. Date of Last Report

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

0527596

Not Applicable

05/01/1996

Yes No

8. This corporation has liability for intangible tax under s. 199.032,

10. Name and Address of New Registered Agent

3. Date Incorporated or Qualified

5. Certificate of Status Desired

6. Election Campaign Financing

Trust Fund Contribution

Florida Statutes

02/07/1986

4. FEI Number 35-1270542

1200 S. PINE ISLAND ROAD		82	Street /	Address (P.O. Box Number is Not Acceptable)			
PLAN	ITATION FL 33324		83			·	······································
						11	
			64	City		FL 85 2	Zip Code
office or re	to the provisions of Sections 607.0502 and egistered agent, or both, in the State of Flo m familiar with, and accept the obligations	rida. Such change was at	uthorized by	the corp	corporation submits this statement for the purpoporation's board of directors. I hereby accept the	ose of changir a appointment	ng its registered as registered
SIGNATURE	Stocyahore, typoid or printed name of registered agent and I	tie if applicable (NOTE:	Rogistered Age	nt signature	required when reinstating) D	ATE	
12.	OFFICERS AND DIR		13.		ADDITIONS/CHANGES TO OFFICERS	AND DIREC	TORS IN 12
TITLE	CD	DELETE	1.1 TITLE		CDP	Chan	ge 🔀 Addition
NAME	FRONEK, DAVID T.		1.2 NAME		premos, yolenit		
STREET ADDRESS	ONE INDIANA SQUARE		1.3 SYREET	address	One Indiana Square		ļ
CITY - ST - ZIP	INDIANAPOLIS IN		1.4 CITY - S	T-ZIP	Indianapolis, "IN		
tiflE	PO	DELETE	21 TITLE		y ' '	Chan	ge 🔣 Addition
NAME	REUTER, GERALD N.		2.2 NAME		Vance, Study D		
STREET ADDRESS	ONE INDIANA SQUARE	•	2.3 STREET	ADDRESS	One Indiana Square		
CITY-SI-PIP	INDIANAPOLIS IN		2. 4 CITY - 5	ST-ZIP	Indianapolis YN		
THILE	Τ	☐ DELETE	3.1 TITLE			☐ Chan	ge 🔲 Addilion
NAME	JETT, SUSAN E		3.2 NAME				
STREET ADORESS	ONE INDIANA SQUARE		3.3 STREET	ADDRESS			
CITY-S1-ZIP	INDIANAPOLIS IN		3 4. CITY - 5	t-ZIP		,	
TITLE	VS	☐ DELETE	4.1 TITLE	Ì		Char	ge L Addition
NAME	SCHNEIDER, ROBERT E.		4. 2 NAME				
STREET ADDRESS	ONE INDIANA SQUARE		4.3 STREET	ADDRESS			
C-TY-ST-ZIP	INDIANAPOLIS IN		4.4 CITY - S	T-ZIP			
TITLE	V	☐ DELETE	5.1 TITLE			Char	ge 🛄 Addition
NAME	PEDERSEN, DAVID A		5.2 NAME				
STREET ADDRESS	ONE INDIANA SQUARE		53 STREET	ADDRESS			
CITY ·S1 - 7₽	INDIANAPOLIS IN		5.4 CITY- S	Y-ZIP			
TITLE	S	DELETE.	6.1 TITLE			Char	ge Addition
NAME	LINTON, CAROL (ASST)		6.2 NAME				
STREET ADDRESS	ONE INDIANA SQUARE		6.3 STREET	ADDRESS			
CHY-ST-ZIP	INDIANAPOLIS IN		6.4 CITY - S				
informatio	ri indicated on this annual report or supple	mental annual report is tri	ue and accu	rate and	tated in Section 119.07(3)(i), Florida Statutes. I that my signature shall have the same legal eff	ect as if made	under oath: that
l am an o	fficer or director of the corporation or the r n Block 12 or Block 13 if changed, or on a	aceiver or trustee empowe	ered to exec	ute this r	eport as required by Chapter 607, Florida Statu	les; and that r	ny name