

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



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

1 of 2

DOCUMENT # **P28788** (8)

1. Corporation Name
DECAR FLEET MANAGEMENT, INC.



Principal Place of Business: **900 OLD COUNTRY RD GARDEN CITY NY 11530 US**
Mailing Address: **900 OLD COUNTRY RD GARDEN CITY NY 11530 US**

3. Date Incorporated or Qualified: **03/30/1990**
3a. Date of Last Report: **03/24/1995**
4. FEI Number: **11-3007068**
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) City & State (23) Zip (24) Country (25)
2a. Mailing Address (26) Suite, Apt. #, etc. (27) City & State (28) Zip (29) Country (30)

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**CT CORPORATION SYSTEM
8751 W. BROWARD BLVD.
PLANTATION FL 33324**

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 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: _____ DATE: _____
Signature: Typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature required when re-registering)

12. OFFICERS AND DIRECTORS

TITLE	VAS	<input type="checkbox"/> DELETE
NAME	CONNOLLY, THOMAS B	
STREET ADDRESS	266 BORROW ST	
CITY - ST - ZIP	JERSEY CITY NJ	
TITLE	VSD	<input type="checkbox"/> DELETE
NAME	HORNE, A.M.	
STREET ADDRESS	904 NEWPORT PIKE	
CITY - ST - ZIP	WILMINGTON DE	
TITLE	P	<input type="checkbox"/> DELETE
NAME	FERRUCCI, M.A.	
STREET ADDRESS	2 E. WEALD AVENUE	
CITY - ST - ZIP	BEAR DE	
TITLE	VAS	<input type="checkbox"/> DELETE
NAME	GEIST, EDWARD G.	
STREET ADDRESS	312 WALDEN ROAD	
CITY - ST - ZIP	WILMINGTON DE	
TITLE	VAS	<input type="checkbox"/> DELETE
NAME	DAWSON, BARBARA	
STREET ADDRESS	86-35 208TH ST	
CITY - ST - ZIP	QUEENS VILLAGE NY	
TITLE	VAS	<input type="checkbox"/> DELETE
NAME	FORSYTHE, JOHN	
STREET ADDRESS	11 CRANE RD	
CITY - ST - ZIP	LOYD HARBOR NY	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	LUTTHANS, KIM E	
1.3 STREET ADDRESS	8 TALLEY CT	
1.4 CITY - ST - ZIP	WILMINGTON DE	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY - ST - ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY - ST - ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY - ST - ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: *Kim E. Lutthans*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-21-96
DATE

CR2E034 (12/95)

DECAR FLEET MANAGEMENT, INC.

CURRENT LIST OF OFFICERS & DIRECTORS

282

P28788

OFFICERS & DIRECTORS	BUSINESS ADDRESS	RESIDENCE
Mark A. Ferrucci President & Director Soc. Sec. #221-40-5754	Corporation Trust Center 1209 Orange St. Wilmington, De. 19801	212 Magnum Drive Bear, DE. 19701
Adrienne M. Horne V P, Secretary, director & Director Soc. Sec. #222-26-8988	"	904 Newport Pike Silverview Wilmington, DE. 19804
Kim E. Luthans Treasurer, V P, Director & Director Soc. Sec. #222-56-8040	"	8 Talley Court Wilmington, DE 19802
E. G. Geist VP / Asst. Secretary Soc. Sec. #051-36-9350	"	312 Walden Road Wilmington, De 19803
John Forsythe Vice President Soc. Sec. #570-62-1996	900 Old Country Rd. Garden City, NY 11530	11 Crane Road Lloyd Harbor, NY 11743
Barbara Dawson VP / Asst. Secretary Soc. Sec. #231-68-0069	CT Corporation System 1633 Broadway New York, N.Y. 10019	86-35 208th St. Queens Village, NY 11427
Sylvia Carey Vice President Soc. Sec. #136-60-8730	"	77 Fieldstone Place Wayne, NJ 07470