

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 26, 1999 8:00 am
Secretary of State

04-26-1999 90291 025 ***150.00

DOCUMENT # P30203

1. Corporation Name
CI LEASING COMPANY

Principal Place of Business

600 TRAVIS
SUITE 5800
HOUSTON TX 77002
US

Mailing Address

600 TRAVIS
SUITE 5800
HOUSTON TX 77002
US

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 25

29 30

9. Name and Address of Current Registered Agent

CI CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

3. Date Incorporated or Qualified

07/17/1990

4. FEI Number

76-0263870

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 owes the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

10. Name and Address of New Registered Agent

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME LEIGHTMAN, E. DANIEL
STREET ADDRESS 5118 CONTOUR
CITY-STATE-ZIP HOUSTON TX
☐ DELETE

TITLE VD
NAME HERBERT, KAREN E
STREET ADDRESS 10 AYLESBURY CT
CITY-STATE-ZIP SUGARLAND TX
☒ DELETE

TITLE S
NAME ENGELDORF, ROSEANN M
STREET ADDRESS 10815 SMITHDALE
CITY-STATE-ZIP HOUSTON TX
☒ DELETE

TITLE T
NAME KOLE, STEPHEN M.
STREET ADDRESS 510 ANCHORAGE
CITY-STATE-ZIP HOUSTON TX
☐ DELETE

TITLE V
NAME AMMERMAN, RANDALL B
STREET ADDRESS 17803 MANTANA CT
CITY-STATE-ZIP SPRING TX 77388
☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-STATE-ZIP

2.1 TITLE V ☒ Change ☐ Addition
2.2 NAME Elledge, David J.
2.3 STREET ADDRESS 3725 Durness
2.4 CITY-STATE-ZIP Houston, TX 77025

3.1 TITLE S ☒ Change ☐ Addition
3.2 NAME Helz, Terrance V.
3.3 STREET ADDRESS 11 Chinarose Court
3.4 CITY-STATE-ZIP The Woodlands, TX 77381

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-STATE-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-STATE-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-STATE-ZIP

14. I 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, with a I other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-23-99

713 209-8400

Date

Daytime Phone #

CR2E034 (1/98)