

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P35159

FILED
Apr 10, 2009
Secretary of State

Entity Name: U.S. BANCORP EQUIPMENT FINANCE, INC.

Current Principal Place of Business:

13010 SW 68TH PKWY.
STE. 100
PORTLAND, OR 97223 US

New Principal Place of Business:

Current Mailing Address:

13010 SW 68TH PKWY.
STE. 100
PORTLAND, OR 97223 US

New Mailing Address:

FEI Number: 93-0594454 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CRACCHIOLO, ANTHONY V
Address: 13010 SW 68TH PKWY STE. 100
City-St-Zip: PORTLAND, OR 97223

Title: S () Delete
Name: BEDNARSKI, LAURA F
Address: 800 NICOLLET MALL, 21ST FL
City-St-Zip: MINNEAPOLIS, MN 55402

Title: T () Delete
Name: NELSON, KENNETH D
Address: 800 NICOLLET MALL, 18TH FL
City-St-Zip: MINNEAPOLIS, MN 55402

Title: AS () Delete
Name: HOGAN, JANE
Address: 13010 SW 68TH PKWY, STE. 100
City-St-Zip: PORTLAND, OR 97223

Title: D () Delete
Name: PAYNE, RICHARD B
Address: 800 NICOLLET MALL, 23RD FLOOR
City-St-Zip: MINNEAPOLIS, MN 55402

Title: D () Delete
Name: MAGLIETTA, SALVATORE J
Address: 13010 SW 68TH PKWY, STE. 100
City-St-Zip: PORTLAND, OR 97223

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JANE HOGAN

ASEC

04/10/2009

Electronic Signature of Signing Officer or Director

_____ Date