2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 16, 2005
Secretary of State

DOCUMENT# P35179

Entity Name: THE FIFTH THIRD LEASING COMPANY

Current Principal Place of Business:

38 FOUNTAIN SQUARE
CINCINNATI, OH 45263

New Principal Place of Business:

Current Mailing Address:

38 FOUNTAIN SQUARE
MD 10AT76
CINCINNATI, OH 45263

New Mailing Address:

FEI Number: 31-0829500 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: SCHAEFER, GEORGE A.,
Address: 38 FOUNTAIN SQUARE PLAZA
City-St-Zip: CINCINNATI, OH 45263

Title: SVP ( ) Delete
Name: DEWBREY, DIANE
Address: 38 FOUNTAIN SQUARE PLAZA
City-St-Zip: CINCINNATI, OH 45263

Title: V ( ) Delete
Name: JACKSON, DAVID A.,
Address: 38 FOUNTAIN SQUARE PLAZA
City-St-Zip: CINCINNATI, OH 45263

Title: VD ( ) Delete
Name: SCHRANTZ, STEPHEN J
Address: 38 FOUNTAIN SQUARE PLAZA
City-St-Zip: CINCINNATI, OH 45263

Title: T ( ) Delete
Name: ARNOLD NEAL E,
Address: 38 FOUNTAIN SQUARE PLAZA
City-St-Zip: CICINNATI, OH 45263

Title: S ( ) Delete
Name: REYNOLDS, PAUL L
Address: 38 FOUNTAIN SQUARE PLAZA
City-St-Zip: CINCINNATI, OH 45263

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: SVP (X) Change ( ) Addition
Name: JACKSON, DAVID A.,
Address: 38 FOUNTAIN SQUARE PLAZA
City-St-Zip: CINCINNATI, OH 45263

Title: SVP (X) Change ( ) Addition
Name: HAAS, JAMES
Address: 38 FOUNTAIN SQUARE PLAZA
City-St-Zip: CINCINNATI, OH 45263

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 for the exemption stated in Section 119.07(3)(i), 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: JAMS R. HUBBARD AS 02/16/2005

Electronic Signature of Signing Officer or Director — Date