

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

FILED

Apr 03 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P38223 (4)
 1. Corporation Name
CAI EQUIPMENT LEASING II CORP.



Principal Place of Business 7175 WEST JEFFERSON AVE. SUITE 4000 LAKEWOOD CO 80235	Mailing Address 7175 WEST JEFFERSON AVE. SUITE 4000 LAKEWOOD CO 80235-2329
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2 Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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3 Date Incorporated or Qualified 03/16/1992	3a Date of Last Report 03/08/1996
4 FEI Number 84-1133179	Applied For Not Applicable
5 Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6 Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8 This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent C T CORPORATION SYSTEM C/O CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND RD. PLANTATION FL 33324	10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code
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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 _____ (NOTE: Registered Agent signature required when reinstating) _____ **DATE** _____

12. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD OLMSTEAD, JOHN F. 7175 WEST JEFFERSON AVE. SUITE 4000 LAKEWOOD CO
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVD LACEY, DENNIS J. 7175 WEST JEFFERSON AVE. SUITE 4000 LAKEWOOD CO
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AVP CAMPBELL, ROBERT J 7175 WEST JEFFERSON AVE. SUITE 4000 LAKEWOOD CO
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVD CHRISTENSEN, JOHN E. 7175 WEST JEFFERSON AVE. LAKEWOOD CO
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S ANDERSON, DAVID J 7175 W. JEFFERSON AVE., #4000 LAKEWOOD CO
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD DIPAOLLO, ANTHONY M 7175 WEST JEFFERSON AVE. LAKEWOOD CO

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Lakewood, CO 80235
2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Lakewood, CO 80235
3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Lakewood, CO 80235
4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Lakewood, CO 80235
5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Lakewood, CO 80235
6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Lakewood, CO 80235

14. I do 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.

SIGNATURE _____

CR2E034 (9/96)