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**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## 1997

## DOCUMENT # P96000039038 (0) NATIONAL FLEET LEASING SOUTH CORPORATION

| Principal Place of Business   |
|-------------------------------|
| 2033 MAIN STREET<br>SUITE 300 |
| SARASOTA FL 34237             |

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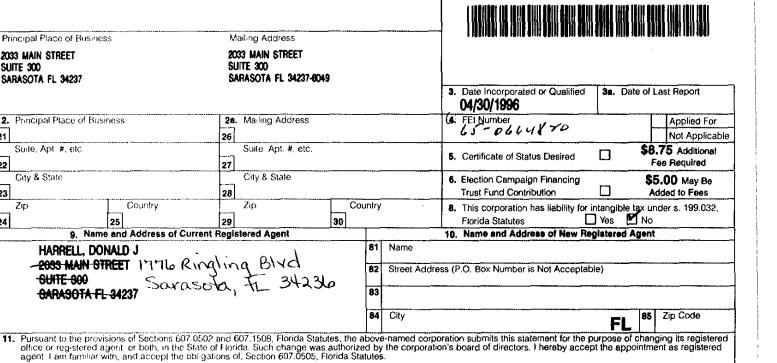
2. Principal Place of Business

25

Suite, Apt. #, etc.

City & State

## FILED Jan 27 1997 8:00am Secretary of State



SIGNATURE Signature, typed or printed name of registered agent as a title if applicable. (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. PRES IDENT Change Addition DELETE TITLE 1 1 TiTLE ALAN S. COHEN NAME 1.2 NAME BLUB 2838 BEECHWOOD STREET ADDRESS 1.3 STREET ADDRESS 15217 ITTSBURGH CITY-ST-ZIP 1.4 CITY - ST-ZIP DELETE Change TITLE 2.1 TITLE AR V.P., SEC, TREAS NAME 22 NAME LARRY WHITMAN De. 279-A CLUBSIDE 2 3 STREET ADDRESS STREET ADDRESS BOCA RATUN FLA 434 2 4 City-ST-ZIP CITY-ST-ZIP Addition ☐ DELETE 31 TITLE Change NAME

3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY - ST- ZIP CITY-ST-ZIP DELETE Change Addition 4.1 TITLE TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CHY-ST-ZIP CITY-ST-ZIP DELETE 5.1 TITLE Change ■ Addition TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY - ST - ZIP DELETE Change Addition 6.1 TITLE TITLE

CITY - ST - ZIP 64 CITY-ST-ZIP 14. I do hereby cerify 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 supplements a phual 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 of the recovery 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 on an appear with an address.

6.2 NAME

6 3 STREET ADDRESS

SIGNATURE:

NAME

STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #