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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

STREET ADDRESS

CITY-ST-ZIP

P96000090207 (7)

CAPITAL EQUIPMENT LEASING COMPANY

Mailing Address Principal Place of Business 2151 N.E. COACHMAN ROAD 2151 N.E. COACHMAN ROAD CLEARWATER FL 34625 CLEARWATER FL 84625 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/30/1996 2. Principal Place of Business 2a. Mailing Address Applied For Not Applicable 21 26 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #. etc 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Country 8. This corporation owes or has paid the current year Intangible Zip 33765 33765 Yes Personal Property Tax due June 30. 25 29 30 24 10, Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 THOMAS, DAVID B 2151 N.E. COACHMAN ROAD 82 Street Address (P.O. Box Number is Not Acceptable) CLEARWATER FL 34625 83 Zip Code 33765 84 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 harve of registered agent and title it approach to (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Change Addition DELETE D 1.1 TITLE TITLE BALDWIN, BRUCE C 1.2 NAME NAME 2151 N.E. COACHMAN ROAD 1.3 STREET ADDRESS STREET ADDRESS CLEARWATER FL 34625 1.4 CITY - ST - ZIP CITY-ST-ZIF Addition DELETE Change 2.1 TITLE TITLE THOMAS, DAVID B 2.2 NAME NAME 2151 N.E. COACHMAN ROAD 2.3 STREET ADDRESS STREET ADDRESS CLEARWATER FL 34625 2. 4 CITY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 3.1 TITLE TITLE NAME BALDWIN, SCOTT A 3.2 NAME 2151 N.E. COACHMAN ROAD STREET ADDRESS 3 3 STREET ADDRESS **CLEARWATER FL 34625** 3 4. CITY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 41 TITLE TITLE PEDALINO, DEAN A 4 2 NAME NAME 2151 N.E. COACHMAN ROAD 4.3 STREET ADDRESS STREET ADDRESS CLEARWATER FL 34625 4.4 CITY-ST-ZIP CITY-ST-ZIP Addition DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Addition DELETE 6.1 TITLE TITLE 50000246679 62 NAME -03/24/98--01051--004 NAME

6 3 STREET ADDRESS

64 CITY-ST-ZIP

14. Thereby 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 reports, 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 fusice 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 of on an attactment with an adolpse. SIMPS LOIST MAS OURS

***150.00

FILED

Mar 24 1998 8:00am

Secretary of State