2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000071587

Entity Name: CAPSTAR LEASING, INC.

FILED Jan 10, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
Clirrent Principal Place of Kilciness	NOW Principal Place of Bilgings

3820 NORTHDALE BLVD.
SUITE 110
SUITE 110, 3RD FLOOR
TAMPA, FL 33624
TAMPA, FL 33624

Current Mailing Address: New Mailing Address:

3820 NORTHDALE BLVD.
SUITE 110
SUITE 110, 3RD FLOOR
TAMPA, FL 33624
TAMPA, FL 33624

FEI Number: 59-3476696 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BARROW, CHARLES G
3820 NORTHDALE BLVD.
SUITE 110
TAMPA, FL 33624 US

BARROW, CHARLES G
3820 NORTHDALE BLVD.
SUITE 110, 3RD FLOOR
TAMPA, FL 33624 US

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: 01/10/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP () Delete Title: DP (X) Change () Addition Name: BARROW, CHARLES G BARROW, CHARLES G

Address: 4517 CHEVAL BLVD. Address: 3837 NORTHDALE BLVD., SUITE 270

City-St-Zip: LUTZ, FL 33558 City-St-Zip: TAMPA, FL 33624

Title: VP () Delete Title: () Change () Addition

 Name:
 NASH, DAN
 Name:

 Address:
 4333 REEVES ROAD
 Address:

 City-St-Zip:
 NEW PORT RICHEY, FL 34652
 City-St-Zip:

Title: VP () Delete Title: () Change () Addition

 Name:
 MORRIS, KEVIN
 Name:

 Address:
 24821 MARY BETH CT.
 Address:

 City-St-Zip:
 LAND O'LAKES, FL 34639
 City-St-Zip:

Title: ST () Delete Title: ST (X) Change () Addition

 Name:
 DEAN, ISRAEL
 Name:
 DEAN, J. ISRAEL

 Address:
 5643 TERRAIN DE GOLF DR.
 Address:
 5632 DARK STAR LOOP

 City-St-Zip:
 LUTZ, FL 33558
 City-St-Zip:
 WESLEY CHAPEL, FL 33544

I hereby certify that the information supplied with this filing does not qualify for the 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: CHARLES G. BARROW DP 01/10/2007