2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 04, 2008 08:00 AN **DOCUMENT # P98000100938 Secretary of State** 1. Entity Name CAPITAL LEASING, INC. Principal Place of Business Mailing Address 1008 ROYAL ABERDEEN WAY 1008 ROYAL ABERDEEN WAY ORLANDO, FL 32828 ORLANDO, FL 32828 US 02012008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-3547294 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BAILEY, JAMES DO NOT WRITE 1008 ROYAL ABERDEEN WAY ORLANDO, FL 32828 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE DATE Signature, twied or proted game of registered agent and title if epolicable (NOTE: Registered Apent signature required when reinstating \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 U00000812743 Trust Fund Contribution. After May 1, 2008 Fee will be \$550.00 Added to Fees 12/09-80061-014 150.00 OFFICERS AND DIRECTORS 10. **PSTD** TITLE NAME BAILEY, JAMES 1008 ROYAL ABERDEEN WAY STREET ADDRESS ORLANDO, FL 32828 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADORESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

407-382-9233