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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

9800 BACHMAN ROAD ORLANDO FL 32824 601 CARLSON PARKWAY 1430 MINNEAPOLIS MN 55305-5332 US 3. Date Incorporated or Qualified 07/03/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For Not Applicable Suite. Apt. # etc. 5. Certificate of Status Desired \$8.75 Additional		MENT # V1728' N AUTO LEASING III, INC.	1 (9)				
2. Principal Place of Business	9800 BACHMAN ROAD		601 CARLSON PARKWAY 1490 Minneapolis Mn 55905-5932		T HABIT BUIDDI LIDIS SOBJE TIDES HALDE WES BURIL BYANT DIAM BYANT BURIT 1981		
2. Principal Pilice of Russinss 22. Marig Address 5. EEI Number 5.9-3111869					· · · · · · · · · · · · · · · · · · ·	h	port
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City & State City & State City & State City & State		# etc.				□ \$8.75 A	dditional
28	22					Fee Rec	
Country Zip Sup 30 Sup S			<u>├</u> ──┐				
9. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 62 64 City City FL 85 Zip Code 65 64 City FL 85 Zip Code 65 66 City FL 85 Zip Code 67 68 City FL 86 Zip Code 68 Zip Code 69 Zip Code 69 Zip Code 69 Zip Code 69 Zip Code 60 Zip Code	Zip	Country		ļ			199.032,
CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code 84 City FL 85 Zip Code 85 Zip Code 86 City FL 85 Zip Code 87 Zip Code 88 Zip Code 89 Zip Code 90 Z	24			30	<u> </u>	, — —	
1200 SOUTH PINE ISLAND ROAD PLANTATION FL 85 Sirce Address (P.O. Box Number is Not Acceptable) 84 City	OT (an negistered Agent	81 Name		iofistaton whatir	
PLANTATION FL				92 6	Address (D.O. Boy N. sybasis Not Assess	obla)	
B3				82 Street	Address (P.O. Box Number is Not Accepta	aoie)	
1. Pursuant to the provisions of Sections 607 05:02 and 607 15:08, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent I are familiar with and accept the obligations of Section 607 05:06, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent large and accept the obligations of Section 607 05:06, Florida Statutes. SIGNATUHE	• •			83			
SIGNATURE Signature point or printed range of all agriculture of languisches 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.				84 City	, , , , , , , , , , , , , , , , , , , ,	FL 85 Zip C	ode
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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 of leaster empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 of Block 13 if phanged or on an attack and the made appears in Block 12 of Block 13 if phanged or on an attack and the made appears in Block 12 of Block 13 if phanged or on an attack and the made appears in Block 12 of Block 13 if phanged or on an attack and the made appears in Block 12 of Block 13 if phanged or on an attack and the made appears in Block 12 of Block 13 if phanged or on an attack and the made appears in Block 12 of Block 13 if phanged or on an attack and the made appears in Block 12 of Block 13 if phanged or on an attack and the made appears in Block 12 of Block 13 if phanged or on an attack and the made appears in Block 12 of Block 13 if phanged or on an attack and the made appears in Block 12 of Block 13 if phanged or on an attack and the made appears in Block 12 of Block 13 if phanged or on an attack and the made appears in Block 12 of Block 13 if phanged or on an attack and the made appears in Block 12 of Block 13 if phanged or on an attack and the made appears in Block 12 of Block 13 if phanged or on an attack and the made appears in Block 12 of Block 13 if phanged or on an attack and the made appears in Block 12 of Block 13 if phanged or on an attack and the made appears in Block 12 of Block 13 if phanged or on an attack and the made appears in Block 12 of Block 13 if phanged or on an attack and the made appears in Block 12 of Block 13 if phanged or on an attack and the made appears in Block 12 of Block 13 if phanged or on an attack and the made app

SIGNATURE

SINATURE AND TYPE OF PRINTED NAME OF SIGNING OFFICER OR DIRECT

1-21-97 612/404-4923

FILED

Jan 31 1997 8:00am

Secretary of State

CR2E034 (9/96)