

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

'95 MAR -6 AM 9:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 857526 (8)

1. Corporation Name
FIRE LEASING COMPANY

Principal Place of Business Mailing Address
1601 QUEENS RD. WEST 1601 QUEENS RD. WEST
CHARLOTTE NC 28207 CHARLOTTE NC 28207

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 08/25/1983 3a. Date of Last Report 02/10/1994

4. FEI Number 56-1065300 Applied For Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

8. The corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

2. Principal Place of Business		2a. Mailing Address	
21	26		
Subs. Apt. #, etc.		Subs. Apt. #, etc.	
22	27		
City & State		City & State	
23	28		
Zip	Country	Zip	Country
24	25	29	30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

81	Name	
82	Street Address (P.O. Box Number is Not Acceptable)	
83		
84	City	
85	Zip Code	FL

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) (Print or typed name of registered agent and the filer) (Date)

(NOTE: Registered Agent signature required when recording)

DATE

12. OFFICERS AND DIRECTORS	
TITLE	VS
NAME	CASH, III, F.A.
STREET ADDRESS	1601 QUEENS RD WEST
CITY - ST - ZIP	CHARLOTTE NC
TITLE	V
NAME	GEORGE, J.L.
STREET ADDRESS	105 FAIRWAY DRIVE
CITY - ST - ZIP	FORT MILL SC
TITLE	P
NAME	CASH, F A
STREET ADDRESS	1601 QUEENS RD WEST
CITY - ST - ZIP	CHARLOTTE NC
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
2	NAME
3	STREET ADDRESS
4	CITY - ST - ZIP
21	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
22	NAME
23	STREET ADDRESS
24	CITY - ST - ZIP
31	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
32	NAME
33	STREET ADDRESS
34	CITY - ST - ZIP
41	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
42	NAME
43	STREET ADDRESS
44	CITY - ST - ZIP
51	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
52	NAME
53	STREET ADDRESS
54	CITY - ST - ZIP
61	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
62	NAME
63	STREET ADDRESS
64	CITY - ST - ZIP

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I further certify that the information contained 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. 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 on block 12 or block 13 of changes, or on an attachment with an address.

SIGNATURE:

J.A. Cash, III
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/1/95 104-375-9651
DATE AND FILE NUMBER