



State of Rhode Island  
and Providence Plantations  
Office of the Secretary of State

A. Ralph Mollis, Secretary of State  
Corporations Division  
148 W. River Street  
Providence, RI 02904-2615  
401.222.3040

## PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2009

Filing Period: January 1 - March 1 • Filing Fee: \$50.00\* THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK  
\* In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. <b>147674</b>		2. Name of Corporation <b>Macrolease Corporation</b>			
3. Street Address Principal Business Office <b>One Turks Head Place</b>			City <b>Providence</b>	State <b>RI</b>	Zip <b>02903</b>
4. Business Phone No.		5. State of Incorporation <b>Rhode Island</b>			
6. Brief Description of the Character of Business Conducted in Rhode Island <b>Generally deal in and promote equipment, machinery, goods and merchandise of all kinds.</b>					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name <b>Mark J. Meiklejohn</b>			Vice President Name <b>Robert H. Wischnowsky</b>		
Street Address <b>One Turks Head Place</b>			Street Address <b>One Turks Head Place</b>		
City <b>Providence</b>	State <b>RI</b>	Zip <b>02903</b>	City <b>Providence</b>	State <b>RI</b>	Zip <b>02903</b>
Secretary Name <b>Margaret D. Farrell</b>			Treasurer Name <b>Linda H. Simmons</b>		
Street Address <b>50 Kennedy Plaza, Ste. 1500</b>			Street Address <b>One Turks Head Place</b>		
City <b>Providence</b>	State <b>RI</b>	Zip <b>02903</b>	City <b>Providence</b>	State <b>RI</b>	Zip <b>02903</b>
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name <b>Mark Meiklejohn</b>			Director Name		
Street Address <b>One Turks Head Place</b>			Street Address		
City <b>Providence</b>	State <b>RI</b>	Zip <b>02903</b>	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES — THIS SECTION <u>MUST</u> BE COMPLETED		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
<b>1,000</b>	<b>Common</b>	<b>\$0.01 Par Value</b>	<b>10</b>	<b>Common</b>	<b>\$0.01 Par Value</b>

This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Margaret D. Farrell 3-31-09  
Signature Date

Margaret D. Farrell

Print or Type Name

Secretary

Title

File Date

4-2-09

Check No.

A205167 P205391

By:

MDC

FOR SECRETARY OF STATE USE ONLY

**PROFIT CORPORATION**  
**ANNUAL REPORT FOR THE YEAR 2009**  
Additional Information Sheet

**MACROLEASE CORPORATION**

**CORPORATE I.D. No:** *147674*

**7. Names and Addresses of the Officers (cont.)**

<i>Name</i>	<i>Address</i>	<i>Title</i>
Linda H. Simmons	One Turks Head Plaza Providence, RI 02903	Assistant Secretary

**FILED**

**APR 02 2009**

**By** *[Signature]*

*ID #147674*