

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 23, 2003 8:00 am
Secretary of State

04-23-2003 90118 019 ***150.00

DOCUMENT # 832027

1. Entity Name
BOMBARDIER CORPORATION



Principal Place of Business
P.O. BOX 768
BARRE VT 05641
US

Mailing Address
PO BOX 7707
WICHITA FL 67277-7707
US

2. Principal Place of Business
101 Park Ave
Suite, Apt. #, etc.

3. Mailing Address
PO Box 7707
Suite, Apt. #, etc.

City & State
New York, NY
Zip 10178
Country USA

City & State
Wichita, KS
Zip 67277-7707
Country USA

4. FEI Number 82-0262961

Applied For
Not Applicable

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

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** **Zip Code**

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 _____ (NOTE: Registered Agent signature required when reinstating) **DATE** _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	AS	☐ Delete
NAME	CARLE, ROGER	
STREET ADDRESS	800 RENE LEVESQUE WEST STE 2900	
CITY-ST-ZIP	MONTREAL (QUEBEC) CA	
TITLE	P	☐ Delete
NAME	STANGL, PETER	
STREET ADDRESS	101 PARK AVE	
CITY-ST-ZIP	NEW YORK NY 10178	
TITLE	S	☐ Delete
NAME	HILBERT, CHRISTOPHER	
STREET ADDRESS	101 PARK AVE	
CITY-ST-ZIP	NEW YORK NY 10178	
TITLE	V	☐ Delete
NAME	GARVEY, JONINA R	
STREET ADDRESS	ONE LEARJET WAY	
CITY-ST-ZIP	WICHITA KS 67209	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	P D	☒ Change ☐ Addition
NAME	Stangl, Peter	
STREET ADDRESS	101 Park Ave	
CITY-ST-ZIP	New York, NY 10178	
TITLE	S D	☒ Change ☐ Addition
NAME	Hilbert, Christopher	
STREET ADDRESS	101 Park Ave	
CITY-ST-ZIP	New York, NY 10178	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D	☐ Change ☒ Addition
NAME	Daniel Desjardins	
STREET ADDRESS	800 Rene-Levesque Blvd, West, Suite 2900	
CITY-ST-ZIP	Montreal, Quebec, Canada H3B 1Y8	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I 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 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:

Jonina R Garvey 4/14/03 316-946-2000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR **Date** **Daytime Phone #**

CR2E034 (10/02)