

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F00000005014

FILED
Apr 17, 2002 8:00 AM
Secretary of State

Entity Name: COMPANION FINANCIAL SERVICES CORPORATION

Current Principal Place of Business:

735 WYCKOFF AVENUE
MAWAH, NJ 07430

New Principal Place of Business:

Current Mailing Address:

735 WYCKOFF AVENUE
MAWAH, NJ 07430

New Mailing Address:

FEI Number: 22-3720262

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FLORIDA COMPLIANCE SPECIALIST, INC.
1331 EAST LAFAYETTE STREET, SUITE F
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

FLORIDA COMPLIANCE SPECIALIST, INC.
2331 HANSON PLACE
TALLAHASSEE, FL 32301 US

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

04/17/2002

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: FOLEY, SILVINA
Address: 735 WYCKOFF AVENUE
City-St-Zip: MAWAH, NJ 07430

Title: ST () Delete
Name: FOLEY, WILLIAM K
Address: 735 WYCKOFF AVENUE
City-St-Zip: MAWAH, NJ 07430

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SILVINA FOLEY

Electronic Signature of Signing Officer or Director

PRES

04/17/2002

Date