

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P94000070031

FILED
Apr 26, 2002 8:00 AM
Secretary of State

Entity Name: CHASE I, INC.

Current Principal Place of Business:

401 NORTH TRYON ST.
NC1-021-03-09
CHARLOTTE, NC 28255 US

New Principal Place of Business:

7300 N KENDALL DR
MIAMI, FL 33156 US

Current Mailing Address:

401 NORTH TRYON ST.
NC1-021-03-09
CHARLOTTE, NC 28255 US

New Mailing Address:

401 NORTH TRYON ST.
NC1-021-02-20
CHARLOTTE, NC 28255 US

FEI Number: 65-0553784

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WOLFSON, MERYL
7300 N KENDALL DRIVE
MIAMI, FL 33156 US

Name and Address of New Registered Agent:

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

_____ 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: MACK, JOHN E.
Address: 401 N. TRYON STREET NC1-021-03-09
City-St-Zip: CHARLOTTE, NC 28255

Title: S () Delete
Name: LUCAS, MARY A
Address: 401 N. TRYON STREET NC1-021-03-09
City-St-Zip: CHARLOTTE, NC 28255

Title: DT () Delete
Name: WILLIAMS, GARY S
Address: 401 N. TRYON STREET NC1-021-03-09
City-St-Zip: CHARLOTTE, NC 28255

Title: SVP (X) Delete
Name: MROZ, GREG S
Address: 401 N. TRYON STREET NC1-021-03-09
City-St-Zip: CHARLOTTE, NC 28255

Title: D (X) Delete
Name: MACK, JOHN E
Address: 401 NORTH TRYON ST.
City-St-Zip: CHARLOTTE, NC 28255 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SVP (X) Change () Addition
Name: MROZ, GREG S
Address: 401 N. TRYON ST NC1-021-02-20
City-St-Zip: CHARLOTTE, NC 28255

Title: S (X) Change () Addition
Name: LUCAS, MARY A
Address: 401 N. TRYON ST NC1-021-02-20
City-St-Zip: CHARLOTTE, NC 28255

Title: DT (X) Change () Addition
Name: WILLIAMS, GARY S
Address: 401 N. TRYON ST NC1-021-02-20
City-St-Zip: CHARLOTTE, NC 28255

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: GREG S MROZ

SVP

04/26/2002

Electronic Signature of Signing Officer or Director

_____ Date