

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 858078

1. Entity Name

GENERAL ELECTRIC CAPITAL BUSINESS ASSET FUNDING

FILED
May 18, 2000 8:00 am
Secretary of State

05-18-2000 90349 046 ***150.00

Principal Place of Business

Mailing Address

10900 NE 4TH ST
- BOX C-97550
BELLEVUE WA 98004-4405
US

PO BOX C97550
BELLEVUE WA 98009
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

91-1219984

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
NELSON, BRUCE
10900 NE 4TH ST., STE. 500
BELLEVUE WA 98004 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VD
JOHNSON, TIMOTHY L
10900 NE 4TH ST., STE 500
BELLEVUE WA 98004 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VD
TAFT, MICHAEL E.
10900 NE 4TH ST., STE 500
BELLEVUE, WA 00000 98004 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Senior Vice President
Vince Iaci
10900 NE 4th St., Suite 500
Bellevue, WA 98004 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V
WATERFIELD, WILLIAM M.
10900 NE 4TH ST., STE. 500
BELLEVUE WA 98004 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VT
ROONEY, JOSEPH G.
10900 NE 4TH ST., STE 500
BELLEVUE WA 98004 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VTD
Joseph & Rooney
10900 NE 4th St., Suite 500
Bellevue, WA 98004 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VS
GRAF, PAUL J.
10900 NE 4TH ST., STE. 500
BELLEVUE WA 98004 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/20/2000

Date

425-451-0090

Daytime Phone #

CR2E034 (9/99)