

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 607703

1. Entity Name

WEST FLORIDA INVESTMENTS, INC.

FILED

Feb 15, 2001 8:00 am
Secretary of State

02-15-2001 90013 017 ***150.00

Principal Place of Business

**C/O CITIBANK
500 W. MADISON, 8TH FLOOR
CHICAGO IL 60661
US**

Mailing Address

**C/O CITIBANK LEGAL DEPT.
500 W. MADISON, 6TH FLOOR
CHICAGO IL 60661
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **36-3049736**

Applied For

Not Applicable

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

**CT CORPORATION SYSTEM
1200-S-PINE ISLAND ROAD
PLANTATION FL 33324**

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.

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, 2001 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 **PDAS** ☒ Delete
NAME **TUCK, LOUISE**
STREET ADDRESS **500 W MADISON 5TH FLOOR**
CITY-ST-ZIP **CHICAGO IL 60661**

TITLE **VP** ☐ Delete
NAME **SAUL, CLARENCE**
STREET ADDRESS **500 W. MADISON, 5TH FLOOR**
CITY-ST-ZIP **CHICAGO IL 60661**

TITLE **D** ☐ Delete
NAME **RUBIN, STANLEY**
STREET ADDRESS **3851 QUEEN PALM DRIVE**
CITY-ST-ZIP **TAMPA FL 33610**

TITLE **S** ☐ Delete
NAME **REGAN, MICHAEL J**
STREET ADDRESS **500 W MADISON, 6TH FLOOR**
CITY-ST-ZIP **CHICAGO IL 60661**

TITLE **T** ☐ Delete
NAME **BURNER, PAUL**
STREET ADDRESS **1 COURT SQUARE**
CITY-ST-ZIP **LONG ISLAND NY 11120**

TITLE **D** ☐ Delete
NAME **JORDAN, ANITA**
STREET ADDRESS **500 WEST MADISON 5TH FLOOR**
CITY-ST-ZIP **CHICAGO IL 60661**

TITLE **PRESIDENT / TREASURER** ☒ Change ☐ Addition
NAME **PAUL BURNER**
STREET ADDRESS **1 COURT SQUARE**
CITY-ST-ZIP **LONG ISLAND CITY, NY 11120**

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

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

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

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 be 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 law; 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

MICHAEL J. REGAN
500 West Madison Street
Chicago, Illinois 60661
IL29/6th Fl./Legal Dept.
(312) 627-5245
P 5433958

Date

Daytime Phone #

CR2E034 (10/00)