

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 06, 2002 8:00 am
Secretary of State

05-06-2002 90180 003 ***150.00

DOCUMENT # 822819

1. Entity Name
CITICAPITAL COMMERCIAL CORPORATION

Principal Place of Business

SUITE #210
1900 SUMMIT TOWER BOULEVARD
ORLANDO FL 32810
US

Mailing Address

SUITE #210
1900 SUMMIT TOWER BOULEVARD
ORLANDO FL 32810
US

2. Principal Place of Business

250 E. Carpenter Fwy.

3. Mailing Address

P. O. Box 660237

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Irving, TX 75062

City & State

Dallas, TX

4. FEI Number

35-1158885

Applied For

Not Applicable

Zip

Country

Zip

Country

75266-0237

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 SOUTH PINE ISLAND RD.
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, 2002 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 **D** ☐ Delete
 NAME **COSTAS, STEPHEN J**
 STREET ADDRESS **250 CARPENTER FREEWAY**
 CITY-ST-ZIP **IRVING TX**

TITLE **V** ☐ Change ☒ Addition
 NAME **Donna Stone**
 STREET ADDRESS **250 E. Carpenter Fwy.**
 CITY-ST-ZIP **Irving, TX 75062**

TITLE **AVPS** ☐ Delete
 NAME **FREDERICK, MICHAEL J**
 STREET ADDRESS **250 CARPENTER FREEWAY**
 CITY-ST-ZIP **IRVING TX 75062**

TITLE **AVT** ☐ Change ☒ Addition
 NAME **Susan M. Williams**
 STREET ADDRESS **250 E. Carpenter Fwy.**
 CITY-ST-ZIP **Irving, TX 75062**

TITLE **VPS** ☒ Delete
 NAME **WONG, MARTIN J**
 STREET ADDRESS **300 ST PAUL PL**
 CITY-ST-ZIP **BALTIMORE MD 21202**

TITLE **V** ☐ Change ☒ Addition
 NAME **Patrick C. Smith**
 STREET ADDRESS **250 E Carpenter Fwy.**
 CITY-ST-ZIP **Irving, TX 75062**

TITLE **TV** ☒ Delete
 NAME **HUGHES, J.F.**
 STREET ADDRESS **250 CARPENTER FREEWAY**
 CITY-ST-ZIP **IRVING TX**

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

TITLE **PD** ☐ Delete
 NAME **GUTHRIE, ROY A**
 STREET ADDRESS **250 CARPENTER FREEWAY**
 CITY-ST-ZIP **IRVING TX 75062**

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

TITLE **D** ☒ Delete
 NAME **SLETTEN, MICHAEL W**
 STREET ADDRESS **250 CARPENTER FREEWAY**
 CITY-ST-ZIP **IRVING TX**

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 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:

Patrick C. Smith SVP

4/26/02

(972) 652-3054

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)