

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 824287

1. Entity Name

AFSC AGENCY INC

FILED

Mar 07, 2000 8:00 am  
Secretary of State

03-07-2000 90062 015 \*\*\*150.00

Principal Place of Business

Mailing Address

% ASSOCIATES CORPORATION OF NORTH AMERICA  
250 CARPENTER FREEWAY  
IRVING TX 75062  
US

P O BOX 660237  
CORPT AX DEPT  
DALLAS TX 75266-0237  
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

35-1165874

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

THE PRENTICE-HALL CORPORATION SYSTEM INC.  
1201 HAYS STREET  
SUITE 105  
TALLAHASSEE FL 32301

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, 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	D	<input type="checkbox"/> Delete
NAME	<del>MISNER, DONALD R JR</del>	
STREET ADDRESS	250 CARPENTER FREEWAY	
CITY-ST-ZIP	IRVING TX	
TITLE	D	<input type="checkbox"/> Delete
NAME	ROSENTRAU, MICHAEL C	
STREET ADDRESS	250 CARPENTER FREEWAY	
CITY-ST-ZIP	IRVING TX	
TITLE	S	<input type="checkbox"/> Delete
NAME	LISKOW, FREDERIC C	
STREET ADDRESS	250 CARPENTER FREEWAY	
CITY-ST-ZIP	IRVING TX	
TITLE	PD	<input type="checkbox"/> Delete
NAME	TIMOTHY W. BELLOWS-	
STREET ADDRESS	250 CARPENTER FREEWAY	
CITY-ST-ZIP	IRVING TX	
TITLE	AVS	<input type="checkbox"/> Delete
NAME	GREENE, P.J.	
STREET ADDRESS	250 CARPENTER FREEWAY	
CITY-ST-ZIP	IRVING TX	
TITLE	TV	<input type="checkbox"/> Delete
NAME	HUGHES, J.F.	
STREET ADDRESS	250 CARPENTER FREEWAY	
CITY-ST-ZIP	IRVING TX	

TITLE	NAME	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	DAVID A. BROOK	
CITY-ST-ZIP		
TITLE	NAME	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	MARK J. MORRISON	
CITY-ST-ZIP		
TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	NAME	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	ATUL VOHRA	
CITY-ST-ZIP		
TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 J. GREENE  
ASS'T VICE PRESIDENT

3/1/00

(972) 452-4277

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)