

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Jun 20, 2002 8:00 am**  
**Secretary of State**

06-20-2002 90059 041 \*\*\*550.00

DOCUMENT # **827069**

1. Entity Name

**ASSOCIATES INFORMATION SERVICES**

**CITIGROUP - Wanda Murkerson**  
290 E Carpenter Freeway - HO1-20  
Irving, TX 75062

**DO NOT WRITE IN THIS SPACE**

**870259**

2. Principal Place of Business

**250 E. Carpenter Freeway**

Suite, Apt. #, etc.

3. Mailing Address

**Wanda J. Murkerson-Citigroup**

Suite, Apt. #, etc.

**290 E. Carpenter Freeway HO1-20**

DO NOT WRITE IN THIS SPACE

City & State

**Irving, TX**

City & State

**Irving, TX**

4. FEI Number

**35-1187902**

Applied For

Not Applicable

Zip

**75062**

Country

**USA**

Zip

**75062**

Country

**USA**

5. Certificate of Status Desired ☐

**\$8.75 Additional Fee Required**

7. Name and Address of Current Registered Agent

Name

**CT Corporation**

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

**1200 S Pine Island Road**

City

**Plantation**

**FL**

Zip Code

**33324**

**DO NOT WRITE  
IN THIS SPACE**

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 reappointing)

DATE

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

January 1 - May 1 Fee is \$150.00  
After May 1 Fee is \$550.00  
Amended UBR is \$81.25  
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

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

**Roy Guthrie P-D**  
**250 Carpenter Freeway**  
**Irving TX 75062**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

**VP**  
**Herbert Gover 6400 Las Colinas**  
**Irving TX 75036**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

**Director**  
**Eric Wentzel 133853rd**  
**NY NY 10019**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

**AVP AS**  
**Patrick Greene**  
**250 Carpenter Irving TX 75062**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

**DO NOT WRITE  
IN THIS SPACE**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 on an attachment with an address, with all other life empowered.

SIGNATURE:

*[Signature]*

**PATRICK J. GREENE**  
**ASSISTANT VICE PRESIDENT**

**6/13/02**

Date

Registering Agency #

CR2E034B (12/01)