

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 31, 2003 8:00 am
Secretary of State

01-31-2003 90090 016 ***150.00

DOCUMENT # 827069

1. Entity Name

ASSOCIATES INFORMATION SERVICES, INC.



Principal Place of Business

**250 E. CARPENTER FREEWAY
IRVING TX 75062
US**

Mailing Address

**WANDA J. MURKERSON-CITIGROUP
290 E. CARPENTER FREEWAY H01-20
IRVING TX 75062
US**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

35-1187902

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

TITLE ☐ Delete
NAME EVP
STREET ADDRESS GOVER, HERBERT
CITY-ST-ZIP 6400 LAS COLINAS
IRVING TX 75038

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

TITLE ☐ Delete
NAME ERIC
STREET ADDRESS 153 E 53RD
CITY-ST-ZIP NEW YORK NY 10043

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

TITLE ☐ Delete
NAME PATRICK
STREET ADDRESS 250 CARPENTER
CITY-ST-ZIP IRVING TX 75062

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

12. 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 689, Florida Statutes, or that I am a person who appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED 1/23/03

**PATRICK S. GREENE
ASST. VICE PRESIDENT
& ASST. SECRETARY**

Date: Daytime Phone #

CR2E034 (10/02)