

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 23, 2004 8:00 am
Secretary of State

08-23-2004 90012 026 ***550.00

DOCUMENT # 835609

1. Entity Name
**GENERAL ELECTRIC CAPITAL TECHNOLOGY
MANAGEMENT SERVICES CORPORATION**



Principal Place of Business
**ONE RIVERFRONT PLACE
NEWPORT, KY 41071**

Mailing Address
**10 RIVERVIEW DRIVE
DANBURY, CT 06810**

34063473



2. Principal Place of Business
10 Riverview Drive

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

08092004 Chg-P CR2E034 (10/03)

City & State
Danbury, CT 06810

City & State

4. FEI Number
94-1686094

Applied For
Not Applicable

Zip
06810

Country
USA

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324**

7. Name and Address of New Registered Agent

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 \$550.00
Due by September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **P** ☒ Delete
NAME **DOBBS, RANDOLPH E**
STREET ADDRESS **ONE RIVERFRONT PLACE**
CITY-ST-ZIP **NEWPORT, KY 41071**

TITLE **T** ☒ Delete
NAME **COLLINS, RONALD G**
STREET ADDRESS **ONE RIVERFRONT PLACE**
CITY-ST-ZIP **NEWPORT, KY 41071**

TITLE **S** ☒ Delete
NAME **TUCKER, MICHAEL K**
STREET ADDRESS **ONE RIVERFRONT PLACE**
CITY-ST-ZIP **NEWPORT, KY 41071**

TITLE **D** ☒ Delete
NAME **DOBBS, RANDOLPH E**
STREET ADDRESS **ONE RIVERFRONT PLACE**
CITY-ST-ZIP **NEWPORT, KY 41071**

TITLE **D** ☒ Delete
NAME **COLLINS, RONALD G**
STREET ADDRESS **ONE RIVERFRONT PLACE**
CITY-ST-ZIP **NEWPORT, KY 41071**

TITLE **AS** ☒ Delete
NAME **MOORE, STEPHEN M**
STREET ADDRESS **10 RIVERVIEW DRIVE**
CITY-ST-ZIP **DANBURY, CT 06810**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **President/Director** ☐ Change ☒ Addition
NAME **Daniel Henson**
STREET ADDRESS **10 Riverview Drive**
CITY-ST-ZIP **Danbury, CT 06810**

TITLE **Treasurer/Director** ☐ Change ☒ Addition
NAME **Matthew Zakrzewski**
STREET ADDRESS **10 Riverview Drive**
CITY-ST-ZIP **Danbury, CT 06810**

TITLE **Secretary/Director** ☐ Change ☒ Addition
NAME **Ivan Fong**
STREET ADDRESS **10 Riverview Drive**
CITY-ST-ZIP **Danbury, CT 06810**

TITLE **Vice President** ☐ Change ☒ Addition
NAME **Mary Stewart**
STREET ADDRESS **10 Riverview Drive**
CITY-ST-ZIP **Danbury, CT 06810**

TITLE ☐ Change ☐ Addition
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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Mary Stewart
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/19/04 (203) 845-6000

Date

Daytime Phone #