## 2000 UNIFORM BUSINESS REPORT (UBR)

### **DOCUMENT # 850818**

1. Entity Name

### BANKERS LEASING CORPORATION

DAINNENS L	EASING CORPORAL	ON					
Principal Place of	Business	Mailing Address					
989 EAST HILLSDALE BLVD 300 FOSTER CITY CA 94404 US		989 EAST HILSDALE BLVD 300 FOSTER CITY CA 94404-4200 US					
2. Principal Place of Business		3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.					
City & State		City & State					
Zip	Country	Zip	Country				

# FILED May 21, 2000 8:00 am Secretary of State

05-21-2000 90007 022 \*\*\*150.00

989 EAST HILLSDALE BLVD 300 FOSTER CITY CA 94404 US		989 EAST HILSDALE BLVD 300 FOSTER CITY CA 94404-4200 US							
2. Principal Place of Business		3. Mailing Address						() <b>() () ()</b>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRIT	E IN THIS SP	ACE.		
City & State		City & State		4.	4. FEI Number 04-2210665			oplied For ot Applicable	
Zip	Country	Zip	p Countr		5.	5. Certificate of Status Desired		\$8.75 Additional Fee Required	
<del></del>	6. Name and Address of Current R	egistered Agent			7.	Name and Address of New Re	egistered Ag	jent	
				Name					
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD			ŀ	Street Address (P.O. Box Number is Not Acceptable)					
PLAI	NTATION FL 33324								
	·			City			FL	Zip Code	e
8. The above	named entity submits this statement for	the purpose of changing its	registere	d office or reg	istered ag	gent, or both, in the State of Flor	rida.		
. ,		3 3	Ū	Ů	_	•			,
SIGNATURE .						<u> </u>	<u> </u>		(
	Signature, typed or printed name of registered agent an	title if applicable (NOTE	: Registered	Agent signature rec	quired when re	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  After MAY 1, 2000 Fee  Make Check Payable to I		00 Fee	will be \$550.		10. Election Campaign Fina Trust Fund Contribution			May Be to Fees	
11.	' OFFICERS AND D	IRECTORS	12.		AD	ODITIONS/CHANGES TO OFFI	CERS AND [	DIRECTOR	S IN 11
TITLE	PTD	☐ Delete	TITLE				1	☐ Change	☐ Addition
NAME	MAGLIETTA, SALVATORE J		NAME						
STREET ADDRESS CITY-ST-ZIP	450 MAMORNECK DR HARRISON NY 10528			ET ADORESS ST-ZIP					Ì
TITLE	VD	□ Delete	TITLE			,		☐ Change	Addition
NAME	KEYES, ROBERT A	Delete	NAME	- 1					
STREET ADDRESS	989 EAST HILLSDALE BLVD		STRE	T ADDRESS					}
CITY-ST-ZIP	FOSTER CITY CA	_	CITY	ST-ZIP					
TITLE : .	-VD	Delete	TITLE					.Change	Addition -
NAME	Browne, Edmond P.		NAM						
STREET ADDRESS	989 EAST HILSDALE BLVD			ET ADDRESS					{
TUITY-ST-ZIP	FOSTER CITY CA	-	CITY	ST-ZIP					
TITLE	8	☐ Delete	TITLE					☐ Change	☐ Addition
NAME	CURT A. SCHULTZ		NAM						
STREET ADDRESS	989 EAST HILLSDALE BLVD			ET ADDRESS ST-ZIP					
CITY-ST-ZIP	FOSTER CITY CA							Change	Addition
TITLE	V CODATT DAREDT R	☐ Delete	TITLE					☐ Change	L.J. Addition
NAME STREET ADDRESS	Spratt, Robert B.   989 E. Hillsdale BLVD		1	ET ADDRESS					}
CITY-ST-ZIP	FOSTER CITY CA			ST-ZIP					
TITLE	AVP	☐ Delete	TITLE	<del></del>				☐ Change	☐ Addition
NAME	O'CONNOR, BRIAN	C Delete	NAME						
STREET ADDRESS	989 E. HILLSDALE BOULEVARD			ET ADDRESS					İ
CITY-ST-ZIP	FOSTER CITY CA 94404			ST-ZIP					}
<b>13</b> . 1 hereby 6	certify that the information supplied with t	his filing does not qualify for	the exe	notion stated i	in Section	119.07(3)(i), Florida Statutes. I	further certif	fy that the i	nformation

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 eath; 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 en address, with all other like empowered.

SIGNATURE;

### OFFICERS AND DIRECTORS

### **BANKERS LEASING CORPORATION**

#### Elected 4/24/98

<u>Title</u>	<u>Name</u>	Business Address
Sr. Vice President, Asst. Secretary and Director	Edmond P. Browne 567-50-5198	989 E. Hillsdale Blvd. Foster City, CA 94404
Vice President and Director	Robert A. Keyes 006-54-6080	989 E. Hillsdale Blvd. Foster City, CA 94404
President and Treasurer	Salvatore J. Maglietta 086-46-3189	450 Mamaroneck Drive Harrison, NY 10528
Vice President and Director	Roger P. Miller 516-56-2168	450 Mamaroneck Drive Harrison, NY 10528
Vice President and Director	Edward S. Mundy 057-36-0734	450 Mamaroneck Drive Harrison, NY 10528
Vice President Lease Administration and Asst. Secretary	Robert B. Spratt 560-70-7146	989 E. Hillsdale Blvd. Foster City, CA 94404
Vice President Tax	Brian O'Connor 224-70-0494	989 E. Hillsdale Blvd. Foster City, CA 94404