

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 14, 2003 8:00 am
Secretary of State

04-14-2003 90068 008 ***150.00

DOCUMENT # 850818

1. Entity Name
BANKERS LEASING CORPORATION



Principal Place of Business
**450 MANARONECK AVE
HARRISON NY 10528
US**

Mailing Address
**250 CARPENTER FREEWAY
H03-17
IRVING TX 75062
US**

10069793



☒ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3. Mailing Address

250 E. CARPENTER FREEWAY

Suite, Apt. #, etc.

Suite, Apt. #, etc.

H03-17

City & State

City & State

Irving, TX

Zip

Country

Zip

Country

75062

4. FEI Number **04-2210665**

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

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
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
NAME
STREET ADDRESS
CITY-ST-ZIP
**PTD
MAGUETTA, SALVATORE J
450 MANORNECK DR
HARRISON NY 10528** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
ETLEN ALMANY
388 GREENWICH ST., 29TH FLOOR
NEW YORK, NY 10043** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VS
SCHULTZ, CURT A
450 MANARONECK AVE
HARRISON NY 10528** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
David A. Smith
450 MANARONECK AVE.
HARRISON, NY 10528** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**V
SMITH, PATRICK C
250 CARPENTER FREEWAY
IRVING TX 75062** ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VD
MUNDY, EDWARD S
450 MANARONECK AVE
HARRISON NY 10528** ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
SOMASEKHAR, AMIRAPU
450 MANARONECK AVE
HARRISON NY 10528** ☒ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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

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 an other like empowered.

SIGNATURE:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/8/03 972-652-4000

Date

Daytime Phone #

CR2E034 (10/02)