

2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 01, 2002 8:00 am**  
**Secretary of State**

04-01-2002 90158 012 \*\*\*150.00

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**DOCUMENT # 853321**

1. Entity Name  
**IFC HOLDINGS, INC.**

Principal Place of Business <b>2701 N. ROCKY POINT DR., 7TH FLOOR          TAMPA FL 33607          US</b>	Mailing Address <b>2701 N. ROCKY POINT DR., 7TH FLOOR          TAMPA FL 33607          US</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address		4. FEI Number <b>59-2195688</b>		Applied For	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		Not Applicable			
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75</b> Additional Fee Required	
Zip	Country	Zip	Country				

6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent			
<b>CT CORPORATION SYSTEM</b> <b>1200 SOUTH PINE ISLAND ROAD</b> <b>PLANTATION FL 33324</b>				Name			
				Street Address (P.O. Box Number is Not Acceptable)			
				City		<b>FL</b>	

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input type="checkbox"/>	<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2002 Fee will be \$550.00</b> <b>Make Check Payable to Department of State</b>	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>TEFO</b> <b>WARD, GARY J</b> <b>2701 N. ROCKY POINT DR., 7TH FLOOR</b> <b>TAMPA FL 33607</b> <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>CFO / Treasurer</b> <b>David Collett</b> <b>2701 N. Rocky Pt. Dr., 7th Fl</b> <b>Tampa, FL 33607</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>ACT</b> <b>TWWOWSKI, DALE</b> <b>2701 N. ROCKY POINT DR 7TH FLOOR</b> <b>TAMPA FL 33607</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>ASST. TREASURER</b> <b>TWARDOWSKI, DALE</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>AS</b> <b>BUGESS, RUTH</b> <b>2701 N. ROCKY POINT DR., 7TH FLOOR</b> <b>TAMPA FL 33607</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>BURGESS, RUTH</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>EVP</b> <b>SMELT, LYNN M</b> <b>2701 N. ROCKY PT DR 7TH FLOOR</b> <b>TAMPA FL 33607</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SVP</b> <b>CASEY, PETER</b> <b>2701 N. ROCKY POINT DR 7TH FL</b> <b>TAMPA FL 33607</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>CAREY, PETER</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>CEO</b> <b>BLAGOJEVICH, ROBERT</b> <b>2701 N. ROCKY POINT DR., 7TH FLOOR</b> <b>TAMPA FL 33607</b> <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>CEO</b> <b>Lynn R. Weidermeier</b> <b>2701 N. Rocky Pt. Dr., 7th Fl</b> <b>Tampa, FL 33607</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Dale Twardowski Asst. Treasurer Date: 3/20/02 Daytime Phone #: 813-289-5703

CR2E034 (9/01)

Attachment

DOCA# 853321

CERTIFICATE OF SECRETARY  
IFC HOLDINGS, INC.

754188

The undersigned, being the duly elected, qualified and acting Secretary of **IFC HOLDINGS, INC.**, a Delaware corporation, formerly known as and doing business as **INVEST Fiancial Corporation ("IFC")**, hereby certifies that the following is a full, true and corect copy of resolutions duly adopted by the Board of Directors of IFC by unanimous written consent dated the 9<sup>th</sup> day of November 2000, and that such resolutions have not been altered or repealed and remain in full force and effect as of the date hereof.

**NOW THEREFORE BE IT RESOLVED**, that the following persons be and they hereby are nominated and elected as officers of IFC, effective as of the date of this written consent, to serve in the capacity designated until his/her earlier resignation or removal:

Lynn R. Neidermeier	President & CEO
David Collett	Executive Vice President, Financial Officer Treasurer
Dale Twardowski	Assistant Controller Assistant Treasurer
Ruth A. Burgess	Senior Vice President Chief Compliance Officer Assistant Secretary
Lynn M. Smelt	Executive Vice President
Peter Carey	Senior Vice President Chief Operations Officer

2701 North Rocky Point Drive.  
7<sup>th</sup> Floor  
Tampa, Florida 33607