

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 90110 019 ***150.00

DOCUMENT # 853841

1. Entity Name
GE CAPITAL MANAGEMENT CORPORATION



Principal Place of Business
**30851 W AGOURA RD
AGOURA HILLS CA 91301**

Mailing Address
**7125 W. JEFFERSON AVE
SUITE 200
LAKEWOOD CO 80235**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **95-3553440**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301**

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 \$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 **PCD** ☐ Delete
NAME **SLAVIK, JAMES E**
STREET ADDRESS **7125 W. JEFFERSON AVE., STE. 200**
CITY-ST-ZIP **LAKEWOOD CO 80235**

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

TITLE **V** ☒ Delete
NAME **OWENS, JAMES J**
STREET ADDRESS **30851 AGOURA RD**
CITY-ST-ZIP **AGOURA HILLS CA 91301**

TITLE **SR. VP** ☒ Change ☐ Addition
NAME **Richard P. McKenney**
STREET ADDRESS **6620 W. Broad Street**
CITY-ST-ZIP **Lakewood, CO 80235**

TITLE **T** ☐ Delete
NAME **PARZICK, ROBERT**
STREET ADDRESS **7125 W. JEFFERSON AVE., STE 200**
CITY-ST-ZIP **LAKEWOOD CO 80235**

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

TITLE **VPD** ☒ Delete
NAME **WASULKO, STEPHEN**
STREET ADDRESS **30851 AGOURA RD**
CITY-ST-ZIP **AGOURA HILLS CA 91301**

TITLE **CFO/D** ☐ Change ☒ Addition
NAME **Hadley Evans**
STREET ADDRESS **7125 W. Jefferson Ave., Suite 200**
CITY-ST-ZIP **Lakewood, CO 80235**

TITLE **EVPD** ☒ Delete
NAME **BERGMANN, RICHARD W.**
STREET ADDRESS **30851 AGOURA RD**
CITY-ST-ZIP **AGOURA HILLS CA 91301**

TITLE **D** ☐ Change ☒ Addition
NAME **Seth Myers**
STREET ADDRESS **7125 W. Jefferson Ave., Suite 200**
CITY-ST-ZIP **Lakewood, CO 80235**

TITLE **VP** ☐ Delete
NAME **ADAMS, JEFFREY J**
STREET ADDRESS **7125 W. JEFFERSON AVE., STE 200**
CITY-ST-ZIP **LAKEWOOD CO 80235**

TITLE **VP/D** ☒ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)

attachment

70055232

#853841

GE CAPITAL MANAGEMENT CORPORATION - LIST OF OFFICERS AND DIRECTORS (continued))

Jay Berman (S/D) 500 Virginia Drive, Ft. Washington, PA 19034
Brenda Daglish (VP) 6604 W. Broad Street, Richmond, VA 23230
Richard G. Fucci (VP) 6604 W. Broad Street, Richmond, VA 23230