

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

0146009 AB

DOCUMENT # F00000004814

1. Entity Name

THE TERRA FINANCIAL COMPANIES, LTD., INC.



FILED

03 JUL 14 AM 8:59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



☐ CHECK HERE IF MAKING CHANGES

Principal Place of Business

200 N. MARTINGALE ROAD, 7TH FLOOR
SCHAUMBURG IL 60173-2096

Mailing Address

6610 W. BROAD ST. 8TH FL.
RICHMOND VA 23230

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

36-3287737

Applied For

Not Applicable

Zip

Country

Zip

Country

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

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

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

After September 10, 2003 Fee will be \$750.00

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 PCEO ☐ Delete
NAME REEDY, DAVID S
STREET ADDRESS 6610 WEST BROAD STREET
CITY-ST-ZIP RICHMOND VA 23230

TITLE ☐ Change ☐ Addition
NAME 10002152022
STREET ADDRESS 07/14/03--01074--002 **\$550.00
CITY-ST-ZIP

TITLE V ☒ Delete
NAME SAVAGE, BRIAN T
STREET ADDRESS 6610 WEST BROAD STREET
CITY-ST-ZIP RICHMOND VA 23230

TITLE Vice President ☐ Change ☒ Addition
NAME Robert Methven
STREET ADDRESS 200 N. Martingale Rd
CITY-ST-ZIP Schaumburg, IL 60170

TITLE CFO ☒ Delete
NAME CASEY, THOMAS W
STREET ADDRESS 6610 WEST BROAD STREET
CITY-ST-ZIP RICHMOND VA 23230

TITLE CFO ☒ Change ☐ Addition
NAME Kelly L. Grah
STREET ADDRESS 6610 W. Broad St.
CITY-ST-ZIP Richmond, VA 23230

TITLE V ☒ Delete
NAME HEINRICH, MARCUS K
STREET ADDRESS 6610 WEST BROAD STREET
CITY-ST-ZIP RICHMOND VA 23230

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

TITLE V ☐ Delete
NAME MINDEL, NORBERT M
STREET ADDRESS 6610 WEST BROAD STREET
CITY-ST-ZIP RICHMOND VA 23230

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

TITLE T ☒ Delete
NAME MURPHY, DAVID R
STREET ADDRESS 6610 WEST BROAD STREET
CITY-ST-ZIP RICHMOND VA 23230

TITLE Treasurer ☒ Change ☐ Addition
NAME Gary T. Prizzia
STREET ADDRESS 6620 W. Broad St.
CITY-ST-ZIP Richmond, VA 23230

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:

THOMAS E. OUFFE REQUIRED

Thomas E. Ouffe / Secretary

(804)

484-7565

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (4/03)