

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 26, 2004 8:00 am
Secretary of State

07-26-2004 90002 013 ***150.00

DOCUMENT # F03000003210

1. Entity Name
UPS CAPITAL BUSINESS CREDIT (INC.) ✓



Principal Place of Business
**280 TRUMBULL STREET
HARTFORD, CT 06103**

Mailing Address
**280 TRUMBULL STREET
HARTFORD, CT 06103**

54064721

2. Principal Place of Business
55 Glenlake Pkwy NE ✓
Suite, Apt. #, etc.

3. Mailing Address
55 Glenlake Pkwy NE
Suite, Apt. #, etc.

07142004 Chg-P CR2E034 (10/03)

City & State
Atlanta, GA ✓

City & State
Atlanta, GA

4. FEI Number
06-0703598 ✓

Applied For
Not Applicable

Zip
30328

Country
U.S.A

Zip
30328

Country
USA

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

**C T CORPORATION SYSTEM
1200 SOUTH 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
Due by September 8, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete
NAME **LAMONACA, FRANK**
STREET ADDRESS **280 TRUMBULL STREET**
CITY-ST-ZIP **HARTFORD, CT 06103**

TITLE **T** ☐ Delete
NAME **BRYANT, MICHAEL G**
STREET ADDRESS **280 TRUMBULL STREET**
CITY-ST-ZIP **HARTFORD, CT 06103**

TITLE **S** ☒ Delete
NAME **MODEROW, JOSEPH** ✓
STREET ADDRESS **280 TRUMBULL STREET**
CITY-ST-ZIP **HARTFORD, CT 06103**

TITLE **AS** ☐ Delete
NAME **HILTON, CATHERINE M**
STREET ADDRESS **280 TRUMBULL STREET**
CITY-ST-ZIP **HARTFORD, CT 06103**

TITLE **D** ☐ Delete
NAME **BERNABUCCI, ROBERT**
STREET ADDRESS **280 TRUMBULL STREET**
CITY-ST-ZIP **HARTFORD, CT 06103**

TITLE **D** ☐ Delete
NAME **HINDS, CLIFFORD L**
STREET ADDRESS **280 TRUMBULL STREET**
CITY-ST-ZIP **HARTFORD, CT 06103**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **AT** ☐ Change ☒ Addition
NAME **Eugene A. Pice**
STREET ADDRESS **55 Glenlake Pkwy NE**
CITY-ST-ZIP **Atlanta, GA 30328**

TITLE **T** ☒ Change ☐ Addition
NAME **Scott D. Davis**
STREET ADDRESS **55 Glenlake Pkwy NE**
CITY-ST-ZIP **Atlanta, GA 30328**

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

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TITLE ☐ 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:

Eugene A. Pice
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-16-04
Date

(404) 828-6307
Daytime Phone #