

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F93000001760

1. Entity Name

GANIS CREDIT CORPORATION

Principal Place of Business

Mailing Address

660 NEWPORT CENTER DRIVE
NEWPORT BEACH CA 92660

660 NEWPORT CENTER DRIVE
NEWPORT BEACH CA 92660-6401

2. Principal Place of Business

3. Mailing Address

600 Anton Blvd.

600 Anton Blvd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

20th Floor

20th Floor

City & State

City & State

Costa Mesa, CA

Costa Mesa, CA

Zip

Country

Zip

Country

92626

Orange

92626

Orange

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

VARONA, ANTHONY M

~~3001 NORTH ROCKY POINT ROAD, #335~~
~~TAMPA FL 33607~~

Name

Varona, Anthony M.

Street Address (P.O. Box Number is Not Acceptable)

17757 U.S. Hwy. 19N

Suite #570

City

Clearwater

FL

Zip Code
33674

DO NOT WRITE IN THIS SPACE

9946



4. FEI Number

95-3737685

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

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

R.C. Goldman

Richard C. Goldman, V.P. and Secretary

4/19/00

Signature, typed or printed name of registered agent and title if applicable.

(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) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD LANNON, PETER K 660 NEWPORT CENTER DRIVE NEWPORT BEACH CA 92660	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS KLIGER, GARTH M 660 NEWPORT CENTER DRIVE NEWPORT BEACH CA 92660	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V GRIMALDI, STEVEN E 660 NEWPORT CENTER DRIVE NEWPORT BEACH CA 92660	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VAS GRIMALDI, STEVEN E 660 NEWPORT CENTER DRIVE NEWPORT BEACH CA 92660	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V ARIENTI, EDWARD J 660 NEWPORT CENTER DRIVE NEWPORT BEACH CA 92660	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	SV/D Lannon, Peter K. 600 Anton Blvd., 20th Floor Costa Mesa, CA 92626	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	A K K K	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/T Schumacher, Richard H. 655 Maryville Centre Drive St. Louis, MO 63141	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/S/D Goldman, Richard C. 655 Maryville Centre Drive St. Louis, MO 63141	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D Arienti, Edward J. 600 Anton Blvd., 20th Floor Costa Mesa, CA 92626	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ 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:

R.C. Goldman

Richard C. Goldman, V.P. and Secretary

4/19/00

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)