

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 28, 2003 8:00 am
Secretary of State

04-28-2003 90185 007 ***150.00

DOCUMENT # F94000005166

1. Entity Name
NCM AMERICAS, INC.



Principal Place of Business
**5026 CAMPBELL BLVD. SUITE C
NOTTINGHAM MD 21236**

Mailing Address
**5026 CAMPBELL BLVD. SUITE C
NOTTINGHAM MD 21236**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **51-1807914**

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

**INSURANCE COMMISSIONER
CAPITOL
TALLAHASSEE FL 32399-0300**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

**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 NAME STREET ADDRESS CITY-ST-ZIP | PD NEIL, LEARY A 210 NORTH CHARLES STREET BALTIMORE MD 21201 <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 | D STONE, ROBERT D 230 PARK AVENUE NEW YORK NY 10169 <input checked="" 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 | VS KNOELL, JOYCE E 210 N CHARLES ST BALTIMORE MD 21201 <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 | VPD FELMAR, MARK S 5026 CAMPBELL BLVD., SUITE C BALTIMORE MD 21236 <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 | BMD PARSHOLT, STEEN KEIZERSGRACHT 281 1016 ED AMSTERDAM THE NETHERLANDS <input checked="" 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 | PCOO SOLITRO, ROBERT M 650 ELM STREET MANCHESTER NH 03101 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |

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: **LISA ANN ROLE** *Lisa Ann Role* **4/23/03** **410-246-5510**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)

Attachment

90106944
#F94000005166

GERLING NCM CREDIT INSURANCE, INC.
BOARD OF DIRECTORS NAMES AND
ADDRESSES

AS OF APRIL 11, 2003

Thomas W. Beckwith
Vice President, Finance
Gerling NCM Credit Insurance, Inc.
5026 Campbell Blvd., Suite C
Baltimore, MD 21236

Neil A. Leary
President
Gerling NCM Credit Insurance, Inc.
5026 Campbell Blvd., Suite C
Baltimore, MD 21236

William J. Clark
Director, Risk Services 6
Gerling NCM Credit Insurance, Inc.
5026 Campbell Blvd., Suite C
Baltimore, MD 21236

Lisa A. Rolf
Treasurer
Gerling NCM Credit Insurance, Inc.
5026 Campbell Blvd., Suite C
Baltimore, MD 21236

Mark S. Felmar
Vice President
Gerling NCM Credit Insurance, Inc.
5026 Campbell Blvd., Suite C
Baltimore, MD 21236

Robert M. Solitro
President and COO
NAS Insurance Group
The Center of New Hampshire
650 Elm Street
Manchester, NH 03101

Harry G. Hayman, III
Senior Vice President
PNC Bank, NA
1600 Market Street
Philadelphia, PA 19103

Peter Ingenlath
Member, Managing Board
Gerling NCM Credit and Finance AG
Hohenzollernring
62 D-50672
Cologne, Germany

Anno Kamphuis
Group Head of Risk Services
NCM Holding NV
Keizersgracht 281
1016 ED Amsterdam
The Netherlands

Attachment 90106944
#F94000005166

**NAMES OF DIRECTORS AND OFFICERS OF
Gerling NCM Credit Insurance, Inc.
As of April 11, 2003**

DIRECTORS

Thomas W. Beckwith
William J. Clark
Mark S. Felmar
Harry G. Hayman, III
Peter Ingenlath
Anno Kamphuis
Neil A. Leary
Lisa A. Rolf
Robert M. Solitro

OFFICERS

Neil A. Leary, President
Mark S. Felmar, Vice President and Asst. Secretary
Adriaan van de Wall, Vice President
Joyce E. Knodell, Vice President and Secretary
Thomas Beckwith, Vice President
Maarten Breed, Vice President
Lisa A. Rolf, Comptroller and Treasurer

Address of all officers: Gerling NCM Credit Insurance, Inc.
5026 Campbell Blvd., Suite C
Baltimore, MD 21236

Attachment

90106944
#F94000005166

**NAMES OF DIRECTORS AND OFFICERS OF
Gerling NCM Credit Insurance, Inc.
As of December 31, 2002**

DIRECTORS

Thomas W. Beckwith
Gilmour B. Black
Mark S. Felmar
Harry G. Hayman, III
Peter Ingenlath
Neil A. Leary
Steen Parsholt
Lisa A. Rolf
Robert M. Solitro

OFFICERS

Neil A. Leary, President
Mark S. Felmar, Vice President and Asst. Secretary
Adriaan van de Wall, Vice President
Joyce E. Knodell, Vice President and Secretary
Thomas Beckwith, Vice President
Maarten Breed, Vice President
Lisa A. Rolf, Comptroller and Treasurer

Address of all officers: **Gerling NCM Credit Insurance, Inc.
5026 Campbell Blvd., Suite C
Baltimore, MD 21236**