

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 17, 2003 8:00 am**  
**Secretary of State**

02-17-2003 90171 048 \*\*\*150.00

**DOCUMENT # F96000000526**

**1. Entity Name**  
**BRACEBRIDGE CORPORATION**



**Principal Place of Business**  
**1100 N. KING ST.**  
**WILMINGTON DE 19884-2811**  
**US**

**Mailing Address**  
**MS #2811**  
**WILMINGTON DE 19884-2811**  
**US**

**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** **51-0342747**

Applied For  
Not Applicable

**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**  
**After May 1, 2003 Fee will be \$550.00**  
**Make Check Payable to Florida Department of State**

**9. Election Campaign Financing** ☐ **\$5.00 May Be Added to Fees**  
Trust Fund Contribution.

**10. OFFICERS AND DIRECTORS**

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE	DP	<input type="checkbox"/> Delete
NAME	WEAVER, LANCE L	
STREET ADDRESS	1100 N. KING ST.	
CITY-ST-ZIP	WILMINGTON DE 19884-2811	
TITLE	DEVP	<input type="checkbox"/> Delete
NAME	BONAVOLONTA, JULES J	
STREET ADDRESS	1100 N. KING ST.	
CITY-ST-ZIP	WILMINGTON DE 19884-2811	
TITLE	EVP	<input type="checkbox"/> Delete
NAME	WRIGHT, VERNON H	
STREET ADDRESS	1100 N. KING ST.	
CITY-ST-ZIP	WILMINGTON DE 19884	
TITLE	D	<input type="checkbox"/> Delete
NAME	VECCHIONE, KENNETH A	
STREET ADDRESS	1100 N. KING ST.	
CITY-ST-ZIP	WILMINGTON DE 19884-2811	
TITLE	EVP	<input type="checkbox"/> Delete
NAME	FLYNN, SHANE G	
STREET ADDRESS	1100 N. KING ST.	
CITY-ST-ZIP	WILMINGTON DE 19884	
TITLE	S	<input type="checkbox"/> Delete
NAME	SCHEFLEN, JOHN W	
STREET ADDRESS	1100 N. KING ST.	
CITY-ST-ZIP	WILMINGTON DE 19884	

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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:** *Nancy L. Manzano* **SIGNATURE REQUIRED** **Nancy L. Manzano**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**2/10/03 (302) 453-9930**

Date

Daytime Phone #

CR2E034 (10/02)

Attachment 90027853  
Doc. # F96000000526

**Bracebridge Corporation**

FEIN:51-0342747

**Mailing Address:**

1100 North King Street  
Wilmington, DE 19884-2811

**ADDITIONAL DIRECTORS**

Louis J. Freeh

**ADDITIONAL OFFICERS**

Louis J. Freeh Chairman/CEO

Thomas D. Wren EVP/Treasurer

Scott A. Green Executive Vice President

Edward G. Plummer Executive Vice President

Lewis D. Schiliro Executive Vice President

Keith C. Maguire Senior Vice President

Robert Rucier Senior Vice President

Terry R. Reilly Senior Vice President

David M. Hirt Assistant Secretary

Deborah Jackson Assistant Secretary

Randall J. Black Assistant Treasurer

Victor P. Manning Assistant Treasurer

Nancy L. Manzano Assistant Treasurer