

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 26, 2002 8:00 am
Secretary of State

02-26-2002 90024 040 ***150.00

DOCUMENT # F96000002074

1. Entity Name
LANDSAFE CREDIT, INC.

Principal Place of Business

6400 LEGACY DR.
PLANO TX 75024

Mailing Address

6400 LEGACY DR.
RM-05, ATTN: C RUSSELL
PLANO TX 75024

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

6400 Legacy Dr PTX-87

Suite, Apt. #, etc.

Attn: Meghan Luce

City & State

Plano TX

Zip

75024

Country

USA

4. FEI Number

95-4579803

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301

7. Name and Address of New Registered Agent

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.

SIGNATURE

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, 2002 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

TITLE **COBD** ☐ Delete
NAME **MOZLO, ANGELO R**
STREET ADDRESS **4500 PARK GRANADA**
CITY-ST-ZIP **CALABASAS CA 91302**

TITLE **CEO** ☐ Delete
NAME **GATES, MARSHALL**
STREET ADDRESS **4500 PARK GRANADA**
CITY-ST-ZIP **CALABASAS CA 91302**

TITLE **S-** ☐ Delete
NAME **SAMUELS, SANDOR E**
STREET ADDRESS **4500 PARK GRANADA**
CITY-ST-ZIP **CALABASAS CA 91302**

TITLE **P** ☒ Delete
NAME **HERSHKOWITZ, BRIAN**
STREET ADDRESS **4500 PARK GRANADA**
CITY-ST-ZIP **CALABASAS CA 91302**

TITLE **AS** ☒ Delete
NAME **PETREY, JANET**
STREET ADDRESS **4500 PARK GRANADA**
CITY-ST-ZIP **CALABASAS CA 91302**

TITLE **T** ☐ Delete
NAME **MANN, JOHN**
STREET ADDRESS **6450 LEGACY DR PTX-87**
CITY-ST-ZIP **PLANO TX 75024**

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

TITLE **PRESIDENT** ☒ Change ☐ Addition
NAME **D. Steve Boland**
STREET ADDRESS **1515 Walnut Grove Ave**
CITY-ST-ZIP **Rosemead, CA 91770-3710**

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

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **6400 Legacy Drive**
CITY-ST-ZIP

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:

John W. Mann

Date

Daytime Phone #

CR2E034 (9/01)