

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 05, 2003 8:00 am**  
**Secretary of State**

05-05-2003 91414 030 \*\*\*158.75

**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**

**11040221**



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

**95-4579803**

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

**CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE FL 32301**

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  
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

**COBD  
MOZLO, ANGELO R  
4500 PARK GRANADA  
CALABASAS CA 91302**

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**CEO  
GATES, MARSHALL  
4500 PARK GRANADA  
CALABASAS CA 91302**

☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**S  
SAMUELS, SANDOR E  
4500 PARK GRANADA  
CALABASAS CA 91302**

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**P  
BOLAND, STEVE D  
1515 WALNUT GROVE AVE  
ROSEMEAD CA 91770**

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**T  
MANN, JOHN  
6400 LEGACY DR  
PLANO TX 75024**

☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**President & COO  
Michael Faine  
6400 Legacy Dr  
Plano TX 75024**

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**Treasurer  
Matthew L. Bosch  
6400 Legacy Dr.  
Plano TX 75024**

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ 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:** Matt Bosch

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**972 608 2307**

CR2E034 (10/02)