

FILED
May 01, 2003 8:00 am
Secretary of State

05-01-2003 90767 015 ***150.00

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F96000005291 ✓

1. Entity Name

GE SERVICE MANAGEMENT, INC.

DO NOT WRITE IN THIS SPACE

90117886

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

APPLIANCE PARK

3. Mailing Address

PO BOX 2216

Suite, Apt. #, etc.

Suite, Apt. #, etc.

AP2-226

City & State

LOUISVILLE, KY

City & State

SCHENECTADY, NY

Zip

40225

Country

USA

Zip

12301-2216

Country

USA

4. FEI Number

61-1310409

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name

CT CORPORATION SYSTEM

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

1200 SOUTH PINE ISLAND RD.

City

PLANTATION

FL

Zip Code

33324

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

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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

SEE ATTACHED LIST

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
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TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
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DO NOT WRITE IN THIS SPACE

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 on an attachment with an address, with all other like empowered.

SIGNATURE: BARBARA A. MELITA **BARBARA A. MELITA/VP & ASST TREAS** 4/22/03 518-433-4337

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

D18052-GE Service Management, Inc.

Federal ID : 61-1310409

Tax Year : 2003 Rpt Mth : 3

Name	Title	Business Address
Barbara A. Melita	Vice President	12 Corporate Woods Boulevard Albany NY 12211 US
Barbara A. Melita	Assistant Treasurer	12 Corporate Woods Boulevard Albany NY 12211 US
Don Olson	President	821 Mt. Tabor Road New Albany IN 47150 US
Frank Yanover	Assistant Treasurer	12 Corporate Woods Blvd. Albany NY 12211
Frank Yanover	Vice President	12 Corporate Woods Blvd. Albany NY 12211
J. Dawn Mayhew	Assistant Treasurer	12 Corporate Woods Blvd Albany NY 12211
J. Dawn Mayhew	Vice President	12 Corporate Woods Blvd Albany NY 12211
Mark E. Buchanan	Vice President	12 Corporate Woods Boulevard Albany NY 12211 US
Mark E. Buchanan	Assistant Treasurer	12 Corporate Woods Boulevard Albany NY 12211 US
Matthew M. Clark	Secretary	Appliance Park AP6-225 Louisville KY US
Russell A. Evans	Treasurer	Appliance Park AP6-229 Louisville KY 40225 US

Attachment
90117886
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