

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Aug 24, 2000 8:00 am**  
**Secretary of State**

08-24-2000 90027 001 \*\*\*550.00

**DOCUMENT # F96000005987**

1. Entity Name

**CONSECO FINANCE VENDOR SERVICES CORPORATION**

Principal Place of Business

**3601 MINNESOTA DR  
 BLOOMINGTON MN 55435**

Mailing Address

**3601 MINNESOTA DR  
 BLOOMINGTON MN 55435**

2. Principal Place of Business

3. Mailing Address

**300 Landmark Towers**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

**345 St. Peter Street**

City & State

City & State

**St. Paul, mn 55102**

4. FEI Number

**86-0834777**

Applied For

Not Applicable

Zip

Country

Zip

Country

**55102**

**USA**

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.

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 \$550.00  
 After SEPTEMBER 13, 2000 Min. will be \$750.00  
 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **DP** ☐ Delete  
 NAME **CRITTENDEN, BRUCE A**  
 STREET ADDRESS **1100 LANDMARK TOWERS 345 ST PETER ST**  
 CITY-ST-ZIP **SAINT PAUL MN 55102**

TITLE **Chairman** ☒ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE **VPSD** ☐ Delete  
 NAME **JOEL H GOTTESMAN**  
 STREET ADDRESS **1100 LANDMARK TOWERS 345 ST PETER ST**  
 CITY-ST-ZIP **SAINT PAUL MN 55102**

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

TITLE **VPT** ☐ Delete  
 NAME **PHYLLIS A KNIGHT**  
 STREET ADDRESS **800 LANDMARK TOWERS 345 ST PETER ST**  
 CITY-ST-ZIP **SAINT PAUL MN**

TITLE **SVPT** ☒ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE **VPS** ☒ Delete  
 NAME **GEORGE McMACKIN**  
 STREET ADDRESS **100 N POINT CTR E STE 200**  
 CITY-ST-ZIP **ALPHARETTA GA 30202**

TITLE **Assistant Secretary** ☐ Change ☒ Addition  
 NAME **Wanda J. Lamb-Lindow**  
 STREET ADDRESS **300 Landmark Towers, 345 St. Peter Street**  
 CITY-ST-ZIP **St. Paul, mn 55102**

TITLE **SVCT** ☐ Delete  
 NAME **DEVANNEY, JR, WILLIAM T**  
 STREET ADDRESS **11825 N PENNSYLVANIA ST**  
 CITY-ST-ZIP **SAINT PAUL MN 55102**

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

TITLE **VPS** ☒ Delete  
 NAME **NANCY GAFFNEY**  
 STREET ADDRESS **95 NORTH ROUTE 17 SOUTH**  
 CITY-ST-ZIP **PARAMUS NJ 07652**

TITLE **P** ☐ Change ☒ Addition  
 NAME **Keith A. Anderson**  
 STREET ADDRESS **1100 Landmark Towers, 345 St. Peter Street**  
 CITY-ST-ZIP **St. Paul, mn 55102**

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:

**Wanda J. Lamb-Lindow**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

**8/18/00**

Daytime Phone #

**(651) 288-4800**

CR2E034 (5/00)

Attachment Doc # F96000054871  
B0104844



CONSECO.

CONSECO FINANCE CORP.  
Corporate Legal Department  
300 Landmark Towers, 345 St. Peter Street  
Saint Paul, Minnesota 55102-1637  
651-293-4800 fax 651-293-5818

August 21, 2000

Florida Division of Corporations  
**UNIFORM BUSINESS REPORT FILINGS**  
P.O. Box 1500  
Tallahassee, Florida 32302-1500

Re: Conseco Finance Vendor Services Corporation  
Conseco Agency, Inc.  
**2000 Uniform Business Report**

Dear Sir or Madam:

Enclosed please find the 2000 Uniform Business Report for Conseco Finance Vendor Services Corporation and Conseco Agency, Inc.

Also enclosed are two checks in the amount of \$550.00 to cover the fees.

If you should have any questions, or need any additional information, please do not hesitate to contact me.

Sincerely,

  
Becky Coakley  
Paralegal

/bc  
Enclosure