2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

F97000000250 **DOCUMENT #**

1. Entity Name

MOUNTAIN VIEW NATIONAL, INC.



FILED Mar 14, 2003 8:00 am Secretary of State 03-14-2003 90056 026 ***150.00



| .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | | V | | | | | | |
|---|---|---|------------------|----------------|-------------------------|---------------------|--|--|---------------------|----------------------------------|
| Principal Place of Business 1775 BROADWAY 23RD FLOOR NEW YORK NY 10019 | | Mailing Address 3100 MONTICELLO SUITE 200 DALLAS TX 75205 | | | | | 4 1000/00 1840 1018 100H 0018 100H 00 | 1 20 181 13 181 1 | EM 1181 I | RIIJI Ro ii A o ir |
| - | lace of Business | 3. Mail | ing Address | | · · · | | | | | |
| | | ļ | | | | | | | | |
| Suite, Apt. | #, etc. | Suite | e, Apt. #, etc. | | | | CHECK HERE IF M | AKING CH | IANGES | |
| City & Stat | е | City & State | | | | 4. | FEI Number 13-3908613 | | <u> </u> | oplied For of Applicable |
| Zip | Zip Country | | Zip Coun | | | 5. | Certificate of Status Desired | | .75 Add Required | |
| | 6. Name and Address of Current I | Registere | d Agent | | | 7. 1 | Name and Address of New Regis | tered Ager | nt . | |
| | ADDITION OVERTING | | | | Name | | • | | | |
| | PORATION SYSTEM ITH PINE ISLAND ROAD | | Street Address | | | ddress (P.O. E | s (P.O. Box Number is Not Acceptable) | | | |
| | ON FL 33324 | | | | | | u. ir . | | | |
| LEGITATI | ON 1 & 00024 | | | | City | | | FL | Zip Code | e |
| | named entity submits this statement for ions of registered agent. | the purp | ose of changing | its register | ed office or | registered ag | ent, or both, in the State of Florida. | l am fami | liar with, | and accept |
| CIONISTUDE | | | | | | | | | | |
| SIGNATURE . | Signature, typed or printed name of registered agent a | nd title if app | licable. (N | OTE: Registere | d Agent signati | ire required when r | einstating) | DATE | | |
| Afte | ILE NOW!!! FEE IS \$150.00 r May 1, 2003 Fee will be \$550.00 | Ctoto | | | | | Election Campaign Financi Trust Fund Contribution. | ng | | May Be |
| 10. | k Payable to Florida Department of OFFICERS AND | | RS PS | 11. | w | Αſ | DDITIONS/CHANGES TO OFFICER | S AND DIF | RECTORS | S IN 11 |
| TITLE | PDCE | DIRECTO | ☐ Delete | TITL | E | | | | Change | Addition |
| NAME | FRIEDMAN, WILLIAM S | | | NAM | IE . | | | | | |
| STREET ADDRESS | 1775 BROADWAY, 23RD FLOOR NEW YORK NY 10019 | | | | EET ADDRESS '-ST-ZIP | | | | | |
| CITY-ST-ZIP | TSVP | | ☐ Delete | TITL | | EVP/T | | | Change | Addition |
| TITLE NAME | MINOR, TODD C. | | □ Delete | NAM | | | Todd C. | Y. | go | |
| STREET ADDRESS | 3100 MONTICELLO, STE. #200 | | | | EET ADDRESS | - | onticello Ave., Ste | 200 | | |
| CITY-ST-ZIP | DALLAS TX 75205 | | | ÇITY | '-ST-ZIP | Dallas, | TX 75205 | | | |
| TITLE | CFEV | | X Delete | TITL Nam | | EVP/CFC | | |] Change | ☆ Addition |
| NAME STREET ADDRESS | DAVIS, ERIN 3100 MONTICELLO, STE. #200 | | | | eet address | ~ | s, Erin D. Onticello Ave., Ste | 200 | | |
| CITY-ST-ZIP | DALLAS TX 75205 | | | | '- \$T- ZIP | | TX 75205 | :. 200 | | |
| TITLE | EVPS | | ☐ Delete | TITL | E E | EVP | 1A / 5205 | | Change | Addition |
| NAME | MANSFIELD, KATHRYN | | | NAM | 1E | Spitz, | Saul | | | ^ |
| STREET ADDRESS | 3100 MONTICELLO, STE. #200 | | | | EET ADDRESS | | coadway, 23rd Floor | <u>.</u> | | |
| CITY-ST-ZIP | DALLAS TX 75205 | | | CITY | '-ST-ZIP | New Yor | ck, NY 10019 | | | |
| TITLE | EVP | | ☐ Delete | TITL | | EVP/CIO | | | Change | Addition |
| NAME | RUBENSTEIN, CHARLES | | | NAM | ie Eet address | | on, William | _ | | |
| STREET ADDRESS CITY-ST-ZIP | 1775 BROADWAY, 23RD FLOOR NEW YORK NY 10019 | | | | '-ST-ZIP | | innipiac St., 3rd F | 'loor | | |
| | INCH FORM IN 10010 | | ☐ Delete | TITL | | Walling Asst. S | ford, CT-06492 | | Change | Addition |
| TITLE NAME | | | L.J Delete | NAM | | Green, | | | Silvingo | 20 1.00mon |
| STREET ADDRESS | | | | | EET ADDRESS | | coadway, 23rd Floor | - | | 1 |
| CITY-ST-ZIP | | | | CITY | '-ST-ZIP | | ck. NY 10019 | | | |
| 12 I berehv | certify that the information supplied with | this filing | does not qualify | for the exe | emption state | | | her certify | that the in | nformation |

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:

214-599-2293

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

| 1. Entity Name | ! | # F97000 NATIONAL, INC. | J000250 | | | | A STATE OF THE PARTY OF THE PAR | | | |
|---|---|---|--|-------------|--|-------------------------------------|--|-------------------|--|--|
| Principal Place of Business 1775 BROADWAY 23RD FLOOR NEW YORK NY 10019 | | | Mailing Address 3100 MONTICELLO SUITE 200 DALLAS TX 75205 | | | | 80054774 | ì | | |
| 2. Principal Place of Business | | | 3. Mailing Address | | | | | | | |
| Suite, Apt. #, etc. | | | Suite, Apt. #, etc. | | | | TO CHECK HERE IF MAKING CHANGES | | | |
| City & State | | | City & State | | | 4. FEI Number 13-3908613 Applied Fo | | | | |
| Zip | | Country | Zip | Count | ry | | 5. Certificate of Status Desired | | | |
| | 6. Name | and Address of Current I | Registered Agent | | | | 7. Name and Address of New Registered Agent | | | |
| C T CORPO | ODATION (| EVETEM | | İ | Name | | | | | |
| | | LAND ROAD | | | Street Address (P.O. Box Number is Not Acceptable) | | | | | |
| PLANTATIO | | | | | | | | | | |
| - | | | | | City | | FL Zip Code | | | |
| | named entity ons of regist | | the purpose of changing its | registere | ed office or r | egistere | stered agent, or both, in the State of Fiorida. I am familiar with, and ac | cept _. | | |
| SIGNATURE _ | Signature, typed | or printed name of registered agent a | and title if applicable. (NOTE | : Registere | d Agent signature | e required | uired when reinstating) DATE | - | | |
| After | May 1, 201 | IFFEE IS \$150.00 @ 33 Fee will be \$550.00 Florida Department of | State), | - | | | 9. Election Campaign Financing \$5.00 May Trust Fund Contribution. Added to Fee | | | |
| 10. | Oldsverad State Light | OFFICERS AND | | 11. | | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | | | |
| NAME STREET ADDRESS | 1775 BRO | I, WILLIAM S ADWAY, 23RD FLOOR K NY 10019 | ☐ Delete | | | | Change A | ddition | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | TSVP MINOR, TO 3100 MON DALLAS T | ITICELLO, STE. #200 | ☐ Delete · | | ET ADDRESS | 3100 | P/T ☑ Change ☐ Ad nor, Todd C. 00 Monticello Ave., Ste. 200 | ddition | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | CFEV DAVIS, EF 3100 MON DALLAS T | ITICELLO, STE. #200 | X Delete | • | E EET ADDRESS | EVP/ Pick 3100 | | ddition | | |
| STREET ADDRESS | | .D, KATHRYN HTICELLO, STE. #200 X 75205 | ☐ Delete | | EET ADDRESS | 1775 | itz, Saul 75 Broadway, 23rd Floor W York, NY 10019 | ddition | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | 1775 BRC | EIN, CHARLES IADWAY, 23RD FLOOR IK NY 10019 | Delete | | E IE EET ADDRESS '-ST-ZIP | EVP/ Thom 346 Wall | P/CIO Change A A nompson, William 6 Quinnipiac St., 3rd Floor | ddition | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | ☐ Delete | CITY | E 16 EET ADDRESS 7-ST-ZIP | Asst Gree 1775 New | reen, Eileen 175 Broadway, 23rd Floor 18 York, NY 10019 | ddition | | |
| indicated | on this repo | irt or supplemental report i he receiver or trustee emp | | as reau | | | n Section 119.07(3)(i), Florida Statutes. I further certify that the informa the same legal effect as if made under oath; that I am an officer or dire 607, Florida Statutes; and that my name appears in Block 10 or Block | | | |
| SIGNAT | TURE: | SIGNATURE AND TYPED OR | PRINTED NAME OF SIGNING OFFICER | OR DIREC | ТОЯ | | 2/28/03 214-599-2291 Date Davime Phone # | 3 | | |