

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F97000000882

1. Entity Name

PORSCHE FUNDING CORPORATION

FILED
May 02, 2000 8:00 am
Secretary of State

05-02-2000 90080 039 ***150.00

Principal Place of Business

Mailing Address

4343 COMMERCE CT., #214
LISLE IL 60532

4343 COMMERCE CT., #214
LISLE IL 60532-3615

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite 300

Suite, Apt. #, etc.

Suite 300

City & State

City & State

4. FEI Number

36-4114979

Applied For

Not Applicable

Zip

Country

Zip

Country

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 \$150.00
After MAY 1, 2000 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	CHANGE	ADDITION
	D	DWYER, ROBERT E	4343 COMMERCE CT., #214 LISLE IL 60532	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
	AS	DUPPER, ROSS A	4343 COMMERCE COURT LISLE IL 60532	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
	P	SORENSEN, PETER	2 WALL STREET 19TH FLOOR NEW YORK NY 10005	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
	T	KOSIEC, RICHARD A	4343 COMMERCE COURT LISLE IL 60532	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
	S	TAJANO, RICHARD	2 WALL STREET 19TH FLOOR NEW YORK NY 10005	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>

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: Richard A. Kosiec
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-25-00 630-505-1515
Date Daytime Phone #

CR2E034 (9/99)