

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 10, 2000 8:00 am
Secretary of State

05-10-2000 90101 009 ***150.00

DOCUMENT # F97000002456

1. Entity Name

INTERFINANCIAL SERVICES CORPORATION

Principal Place of Business

Mailing Address

260 INTERSTATE N. CIR. NW
 ATLANTA GA 30339

POST OFFICE BOX 50355
 ATLANTA GA 30302-0355

2. Principal Place of Business

3. Mailing Address

~~260 Interstate North Cir., P.O. Box 50355~~
 Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

58-1635849

Applied For

Not Applicable

Atlanta, Georgia 30339
 Zip Country

Atlanta, Georgia 30302
 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

**CORPORATION SERVICE COMPANY
 1201 HAYS STREET
 TALLAHASSEE FL 32301-2525**

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 Delete
 NAME **P WILLIAMS, JEFFREY W**
 STREET ADDRESS **260 INTERSTATE NORTH CIRCLE, NW**
 CITY-ST-ZIP **ATLANTA GA 30339**

TITLE Change Addition
 NAME **260 Interstate North Circle, NW**
 STREET ADDRESS **Atlanta, Georgia 30339**
 CITY-ST-ZIP

TITLE Delete
 NAME **VP MCNALLY, PETER**
 STREET ADDRESS **260 INTERSTATE NORTH CIRCLE, NW**
 CITY-ST-ZIP **ATLANTA GA 30339**

TITLE Change Addition
 NAME **260 Interstate North Circle NW**
 STREET ADDRESS **Atlanta, Georgia 30339**
 CITY-ST-ZIP

TITLE Delete
 NAME **S WEXLER, HOWARD**
 STREET ADDRESS **260 INTERSTATE NORTH CIRCLE, NW**
 CITY-ST-ZIP **ATLANTA GA 30339**

TITLE Change Addition
 NAME **260 Interstate North Circle, NW**
 STREET ADDRESS **Atlanta, Georgia 30339**
 CITY-ST-ZIP

TITLE Delete
 NAME **D FREEDMAN, ALLEN R**
 STREET ADDRESS **ONE CHASE MAHATTAN PLAZA**
 CITY-ST-ZIP **NEW YORK NY 1005**

TITLE Change Addition
 NAME **One Chase Manhattan Plaza**
 STREET ADDRESS **New York, NY 10005**
 CITY-ST-ZIP

TITLE Delete
 NAME **T HARPER, EDWIN L**
 STREET ADDRESS **260 INTERSTATE NORTH CIRCLE, NW**
 CITY-ST-ZIP **ATLANTA GA 30339**

TITLE Change Addition
 NAME **260 Interstate North Circle, NW**
 STREET ADDRESS **Atlanta, Georgia 30339**
 CITY-ST-ZIP

TITLE Delete
 NAME **D CLAYTON, J K**
 STREET ADDRESS **ONE CHASE MANHATTAN PLAZA**
 CITY-ST-ZIP **NEW YORK NY 1005**

TITLE Change Addition
 NAME **One Chase Manhattan Plaza**
 STREET ADDRESS **New York, NY 10005**
 CITY-ST-ZIP

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 line empowered.

SIGNATURE:

Bruce VanGeest

Bruce VanGeest 5-1-00 770)763-2469

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #