

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # F97000003021**1. Entity Name
EQUIFIRST CORPORATION**FILED**
Apr 26, 2001 8:00 am
Secretary of State

04-26-2001 90321 044 ***150.00

Principal Place of Business

**820 FOREST POINT CIRCLE
CHARLOTTE NC 28273**

Mailing Address

**820 FOREST POINT CIRCLE
CHARLOTTE NC 28273**

2. Principal Place of Business

500 Forest Point Circle

Suite, Apt. #, etc.

3. Mailing Address

500 Forest Point Circle

Suite, Apt. #, etc.

City & State

Charlotte, NC

Zip

28273

Country

Mecklenburg

City & State

Charlotte, NC

Zip

28273

Country

Mecklenburg4. FEI Number **56-1704428**

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324**

7. Name and Address of New Registered Agent

Name

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

City

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, 2001 Fee will be \$550.00
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees

11. OFFICERS AND DIRECTORS

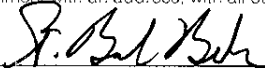
TITLE	PCD	<input type="checkbox"/> Delete
NAME	BRADLEY, CHARLES W	
STREET ADDRESS	2800 ROSEGATE LANE	
CITY-STATE-ZIP	CHARLOTTE NC 28270	
TITLE	VSD	<input checked="" type="checkbox"/> Delete
NAME	MOORE, HUGH C	
STREET ADDRESS	5423 PIPER GLEN DRIVE	
CITY-STATE-ZIP	CHARLOTTE NC	
TITLE	V	<input type="checkbox"/> Delete
NAME	BUSH, F B	
STREET ADDRESS	4826 ADDISON DRIVE	
CITY-STATE-ZIP	CHARLOTTE NC	
TITLE	VT	<input checked="" type="checkbox"/> Delete
NAME	ACUFF, JAMES L	
STREET ADDRESS	8655 WALSHAM DRIVE	
CITY-STATE-ZIP	CHARLOTTE NC	
TITLE	AT	<input checked="" type="checkbox"/> Delete
NAME	LEWIS, ANGELA B	
STREET ADDRESS	9120 C NOLLEY COURT	
CITY-STATE-ZIP	CHARLOTTE NC	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE	VSD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	TENNYSON, JEFFREY G.	
STREET ADDRESS	11309 CATHERINE'S MINE CR.	
CITY-STATE-ZIP	CHARLOTTE, NC 28277	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE	VT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	RIELLY, TODD A.	
STREET ADDRESS	7711 EPPING FOREST DRIVE	
CITY-STATE-ZIP	HUNTERSVILLE, NC 28078	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-STATE-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 like empowered.

SIGNATURE:



F. Brad Bush

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/18/01

Date

(704) 679-4456

Daytime Phone #

CR2E034 (10/00)