

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 24, 2000 8:00 am
Secretary of State
05-24-2000 90482 001 ***450.00

DOCUMENT # **F9800000000432**
Entity Name
BOMBARDIER CAPITAL MORTGAGE SECURITIZATION CORPORATION

Principal Place of Business
261 Mountain View Drive
Colchester, VT 05446
Mailing Address
12850 Gran Bay Pkwy W
Jacksonville, FL 32258

17171

Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip
Country
3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip
Country

4. FEI Number
03-0355080
Applied For
Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

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
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
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Director
Pierre Lortie
12850 Gran Bay Pkwy W
Jacksonville, FL 32258
Delete
Director
R. William Crowe
12850 Gran Bay Pkwy W
Jacksonville, FL 32258
Delete
Director and Treasurer
Blaine H. Filthaut
12850 Gran Bay Pkwy W
Jacksonville, FL 32258
Delete
Director
Francis C. Killackey
12850 Gran Bay Pkwy W
Jacksonville, FL 32258
Delete
Director
David T. Austin
159 Bank Street
Burlington, VT 05401
Delete
Director
Ronald G. Peace
12850 Gran Bay Pkwy W
Jacksonville, FL 32258
Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Change Addition
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Change Addition
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Change Addition
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Change Addition

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: **Laurence W. Howard**
Assistant Secretary
5/18/00 904-288-1000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)