Block 12 if

Ass't Vice President & Ass't Secretary

FILED

## 2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

## Mar 12, 2001 8:00 am DOCUMENT # F98000005229 **Secretary of State** ASSOCIATES COMMERCE SOLUTIONS, INC. 03-12-2001 90468 050 \*\*\*150.00 Principal Place of Business Mailing Address 250 CARPENTER FREEWAY P.O. BOX 6660237 ATTN: CORPORATE TAX DEPARTMENT IRVING TX 75062 DALLAS TX 75266-0237 2. Principal Place of Business 3. Mailing Address Suite, Apt, #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 36-3368320 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND RD. PLANTATION FL 33324 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) FILE NOW!!! FEE IS \$150,00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ☐ Change Addition TITLE □ Delete TITI F ROBINSON, RICHARD L NAME NAME STREET ADDRESS 250 CARPENTER FREEWAY STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **IRVING TX ASVO** ☐ Change ☐ Addition TITLE ☐ Delete TITLE FREDERICK, MICHAEL J NAME NAME STREET ADDRESS 250 CARPENTER FREEWAY STREET ADDRESS CITY-ST-ZIP **IRVING TX** CITY-ST-ZIP TEVP ---- Delete \_TITLE -☐ Change HUGHES, JOHN F STREET ADDRESS 250 CARPENTER FREEWAY STREET ADDRESS CITY-ST-ZIP **IRVING TX** CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition BERMAN, DON A NAME NAME STREET ADDRESS 250 CARPENTER FREEWAY STREET ADDRESS CITY-ST-ZIF IRVING TX CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME DALY, TIMOTHY NAME STREET ADDRESS 250 CARPENTER FREEWAY STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP IRVING TX Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 outh; 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 in changed, or on an attachment with an address! with all other/like empowered.