

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 22, 2002 8:00 am**  
**Secretary of State**

05-22-2002 90270 008 \*\*\*\*50.00

**DOCUMENT # M99000001617**

1. Entity Name

**PREMIUM LEASE & FINANCE, LLC**

Principal Place of Business

**250 CARPENTER FREEWAY  
 IRVING TX 75062**

Mailing Address

**250 CARPENTER FREEWAY  
 IRVING TX 75062**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**75-2838992**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$5.00 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, typ

and title if applicable.

(NOTE: Regis

when reinstating)

DATE

**FILE NOW!!! FEE IS \$50.00  
 Make Check Payable to Department of State  
 Due By May 1, 2002**

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE **MGR** ☐ Delete  
 NAME **GUTHRIE, ROY A Guthrie**  
 STREET ADDRESS **250 CARPENTER FREEWAY**  
 CITY-ST-ZIP **IRVING TX 75062**

☐ Change ☐ Addition  
 TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE **MGR** ☐ Delete  
 NAME **COSTAS, STEPHEN J**  
 STREET ADDRESS **250 CARPENTER FREEWAY**  
 CITY-ST-ZIP **IRVING TX 75062**

☐ Change ☐ Addition  
 TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE **MGR** ☒ Delete  
 NAME **SLETTEN, MICHAEL W**  
 STREET ADDRESS **250 CARPENTER FREEWAY**  
 CITY-ST-ZIP **IRVING TX 75062**

☐ Change ☐ Addition  
 TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE **MGR** ☐ Delete  
 NAME **HUGHES, JOHN F**  
 STREET ADDRESS **250 CARPENTER FREEWAY**  
 CITY-ST-ZIP **IRVING TX 75062**

☐ Change ☐ Addition  
 TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE **MGR** ☒ Delete  
 NAME **FREDERICK, MICHAEL S**  
 STREET ADDRESS **250 CARPENTER FREEWAY**  
 CITY-ST-ZIP **IRVING TX 75062**

☐ Change ☐ Addition  
 TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE **MGR** ☒ Delete  
 NAME **WONG, MARTIN J**  
 STREET ADDRESS **300 ST. PAUL PLACE**  
 CITY-ST-ZIP **BALTIMORE MD 21202**

☐ Change ☐ Addition  
 TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

**SIGNATURE:**

**SIGNATURE REC**

**Vaneesa R. McCrary  
 Ass't Vice President  
 & Ass't Secretary**

**5/25/02**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

CR2E083 (9/01)