

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00427

1. Entity Name

MERCURY FINANCE COMPANY OF FLORIDA

FILED

00 JUN 16 PM 2:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

100 FIELD DR
340
LAKE FOREST IL 60045-2500
US

100 FIELD DR
340
LAKE FOREST IL 60045-2599
US

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 36-3259211

Applied For

Not Applicable

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

CT CORPORATION SYSTEM
1200 S. 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, 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 PCD
NAME BRANDT, WILLIAM A J
STREET ADDRESS 100 FIELD DRIVE SUITE #340
CITY-ST-ZIP LAKE FOREST IL ☐ Delete

TITLE President/CEO
NAME Edward G Harshfield
STREET ADDRESS 100 Field Drive, Suite 340
CITY-ST-ZIP Lake Forest, IL 60045 ☒ Change ☐ Addition

TITLE VPT
NAME CARUSO, FRED C
STREET ADDRESS 100 FIELD DRIVE SUITE #340
CITY-ST-ZIP LAKE FOREST IL ☐ Delete

TITLE Vice President/CFO
NAME Jeffrey B Weeden
STREET ADDRESS 100 Field Drive, Suite 340
CITY-ST-ZIP Lake Forest, IL 60045 ☒ Change ☐ Addition

TITLE VPS
NAME O'MALLEY, PATRICK J
STREET ADDRESS 100 FIELD DRIVE SUITE #340
CITY-ST-ZIP LAKE FOREST IL ☐ Delete

TITLE Secretary
NAME Mark E Dapier
STREET ADDRESS 100 Field Drive, Suite 340
CITY-ST-ZIP Lake Forest, IL 60045 ☒ Change ☐ Addition

TITLE V
NAME SHARP, BRADLEY D
STREET ADDRESS 100 FIELD DR STE 340
CITY-ST-ZIP LAKE FOREST IL ☐ Delete

TITLE Treasurer
NAME David W Berkow
STREET ADDRESS 100 Field Drive, Suite 340
CITY-ST-ZIP Lake Forest, IL 60045 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE Controller
NAME Mark D Whitham
STREET ADDRESS 100 Field Drive, Suite 340
CITY-ST-ZIP Lake Forest, IL 60045 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CHRISTOPHER DENVER

Date

Daytime Phone #

CR2E034 (9/99)

06/08/00 90014 017 1,650.00

5/25/00

847-295-8600