

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
May 12 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P18724** (5)
1. Corporation Name
UNISYS FINANCE CORPORATION



Principal Place of Business TOWNSHIP LINE & UNION MTG. RDS. BLUE BELL PA 19424 US	Mailing Address P.O. BOX 500 C1SE14 BLUE BELL PA 19424 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country 24		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country 29		3. Date Incorporated or Qualified 04/06/1988	
4. FEI Number 38-2574919		Applied For Not Applicable		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			

9. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent Signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MARTIN, STEPHEN W.	1.2 NAME	
STREET ADDRESS	TOWNSHIP LINE & UNION MTG. RDS.	1.3 STREET ADDRESS	
CITY-ST-ZIP	BLUE BELL PA	1.4 CITY-ST-ZIP	19424
TITLE	VSD	2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ANDERSON, RONALD C	2.2 NAME	
STREET ADDRESS	TOWNSHIP LINE & UNION MTG. RDS	2.3 STREET ADDRESS	
CITY-ST-ZIP	BLUE BELL PA	2.4 CITY-ST-ZIP	19424
TITLE	CPTD	3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	NOLL, PETER	3.2 NAME	
STREET ADDRESS	TOWNSHIP LINE & UNION MTG. RDS.	3.3 STREET ADDRESS	
CITY-ST-ZIP	BLUE BELL PA	3.4 CITY-ST-ZIP	19424
TITLE	AT	4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SILVERBERG, JACK R.	4.2 NAME	
STREET ADDRESS	TOWNSHIP LINE & UNION MTG. RDS.	4.3 STREET ADDRESS	
CITY-ST-ZIP	BLUE BELL PA	4.4 CITY-ST-ZIP	19424
TITLE	AS	5.1 TITLE	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	KEENE, SUSAN T	5.2 NAME	
STREET ADDRESS	TWONSHIP LINE & UNION MTG. RDS.	5.3 STREET ADDRESS	TOWNSHIP LINE
CITY-ST-ZIP	BLUE BELL PA	5.4 CITY-ST-ZIP	19424
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

RONALD C. ANDERSON

4/23/98 615)986-4744

CR2E034 (10/97)