May 11, 1999 8:00 am Secretary of State

05-11-1999 90032 002 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P18724

1. Corporation Name

LINISYS FINANCE CORPORATION

0141010	the managed of the state of the								
Dissipal Place	of Business	Mailing Address				{	GICH SIBIL DIGH OU	ITT OFOIR LOOK	
Principal Place of Business Mailing Address TOWNSHIP LINE & UNION MTG. RDS. P.O. BOX 500 C1SE14 BLUE BELL PA 19424 US US						DO NOT WRITE IN THIS SPACE			
35						3. Date Incorporated or Qualifed		,	
						04/06/1988			
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number	App	lied For	
21		26				38-2574919	Not	Applicable	
Suite, Apt.	#, etc. bytay 68-120	Suite, Apt. #, etc.	y i	 :8-12	O	5. Certifcate of Status Desired	\$8.75 Ac Fee Req		
City & State		City & State () 28 blue bel	efa	-		Election Campaign Financing Trust Fund Contribution	\$5.00 N Added to		
Zip	Country	Zip	Countr	у		8. This corporation owes the current year In			
24 1942	4 25	29 19424 31	0			Personal Property Tax.	Yes	No	
Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent			
81 Name									
CT CORPORATION SYSTEM				82 Street Address (P.O. Box Number is Not Acceptable)					
1200 S. PINE ISLAND ROAD							· · · · · · · · · · · · · · · · · · ·		
PLANTATION FL 33324				3					
			84	4 City		FI	85 Zip Co	ode	
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				beniupe	when reinstaling) DATE			
12. OFFICERS AND DIRECTORS						ADDITIONS/CHANGES TO OFFICERS A			
TITLE	D DELETE		1,1 TITLE			_	Change Change	☐ Addition	
NAME	MARTIN, STEPHEN W.			1.2 NAME			5		
STREET ADDRESS	TOWNSHIP LINE & UNION MTG. RDS.			1.3 STREET ADDRESS ω		unpurary mis E	8120		
CITY-ST-ZIP	BLUE BELL PA 19424			1.4 GITY-ST-ZIP		unip Stary m15 E			
TITLE	VSD DELETE			■ 2.1 THUE		_	Change	Addition	
NAME	ANDERSON, RONALD C		2.2 NAME SCI		Şα	san T. Keene	`		
STREET ADDRESS	TOWNSHIP LINE & UNION MTG. RDS			2.3 STREET ADDRESS ω		uniperay mis Ex	1-120	}	
CITY-ST-ZIP	BLUE BELL PA 19424			2. 4 CITY-ST-ZIP		0 0			
TITLE	CPTD DELETE		3 1 TITLE				Change	☐ Addition	
NAME	NOLL, PETER		3.2 NAME			lan	10-12 -		
STREET ADORESS	70-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1			3.3 STREET ADDRESS ω		usipurary m15 EP-120			
CITY-ST-ZIP	BLUE BELL PA 19424	•	3.4. CITY	ST-ZIP					
TITLE	AT DELETE		4.1 TITLE				Change	Addition	
NAME	SILVERBERG, JACK R.		4. 2 NAMI	:		· Va	-، (<i>أ</i> -	ĺ	
STREET ADDRESS	TOWNSHIP LINE & UNION MTG	. RDS.	4.3 STRE	ET ADDRESS	u	reip way mis	EY-120		
CITY-ST-ZIP	BLUE BELL PA 19424	= - -	4.4 CITY-			0 0			

CITY-ST-ZIP 14. 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, with all other like empowered.

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

SIGNATURE:

AS

KEENE, SUSAN T

BLUE BELL PA 19424

TOWNSHIP LINE & UNION MTD RDS

TITLE

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

ED NAME OF SIGNING OFFICER OR DIRECTOR

DELETE

☐ DELETE

4/20/99

m15 E8-120

Change

☐ Addition

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UNISYS FINANCE CORPORATION

Officers:

Peter S. Noll

Chairman, President, Chief Executive Officer

and Treasurer

Vice President and Secretary

Assistant Secretary Assistant Treasurer

Susan T. Keene Mary Kay Gould Jack R. Silverberg

Directors:

Susan T. Keene Stephen W. Martin Peter S. Noll

THE ABOVE NAMED OFFICERS AND DIRECTORS CAN BE CONTACTED AT:

Unisys Finance Corporation Unisys Way Blue Bell, PA 19424