## 2000 UNIFORM BUSINESS REPORT (UBR)

## **FILED DOCUMENT # P25132** Apr 04, 2000 8:00 am Secretary of State 1. Entity Name CARD-FLO #2, INC. 04-04-2000 90106 049 \*\*\*150.00 Mailing Address Principal Place of Business ONE MARINE MIDLAND CTR ONE MARINE MIDLAND CTR 15TH FLOOR 15TH FLOOR **BUFFALO NY 14203** BUFFALO NY 14203-2842 2. Principal Place of Business 3. Mailing Address DNE HSBC <u>ONE HSBC</u> CENTER CENTER DO NOT WRITE IN THIS SPACE 5th FLOOR 5th FLOOR City & State 4. FEI Number Applied For 16-1350135 BUFFALO UFFALO Not Applicable Country VSA \$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 THE PRENTICE-HALL CORPORATION SYSTEM, INC. Street Address (P.O. Box Number is Not Acceptable) 110 NORTH MAGNOLIA ST. TALLAHASSEE FL 32301 City 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 (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible **\$5.00** May Be 10. Election Campaign Financing Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. **AST** TITLE Delete TITLE MARY E. SONDEL RICH, RICHARD P. NAME NAME STREET ADORESS ONE HSBC CENTER STREET ADDRESS 1 MARINE MIDLAND CTR CITY-ST-ZIP CITY-ST-ZIP **BUFFALO NY 14203** BUFFALO NY 14203 Change ☐ Addition TITLE ☐ Delete TITLE HUNTER, DAVID J NAME NAME ONE HISBL CENTER ONE MARINE MIDLAND CTR. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BUFFALO NY 14203** AST. ☐ Delete Change Addition TITLE SOMMER, MARY B. NAME ONE HSBC CENTER 1 MARINE MIDLAND CENTER STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BUFFALO NY** Delete TITLE Change ☐ Addition TITLE TOOHEY, PHILIP, S NAME NAME ONE HSBC CENTER STREET ADDRESS STREET ADDRESS 1 MARINE MIDLAND CENTER CITY-ST-ZIP CITY-ST-ZIP **BUFFALO NY**

DUPFALD INV 14203 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.

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

CITY-ST-ZIP

SIGNATURE:

AS

KUJAWA, HELEN

**BUFFALO NY 14203** 

1 MARINE MIDLAND CENTER

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-7IP

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OF

☐ Delete

☐ Delete

ONE HSBC CENTER

ONE HSBC CENTER

GORDON A. FARQUHAR

3-15-00 916-841-5791
Daytime Phone #

Change

Change

☐ Addition

Addition