

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 11, 2001 8:00 am**  
**Secretary of State**

05-11-2001 90308 005 \*\*\*150.00

**DOCUMENT # P32434**

1. Entity Name

GE GOVERNMENT SERVICES, INC.

Principal Place of Business

Mailing Address

PO BOX 2216

PO BOX 2216

SCHENECTADY, NY 12301

SCHENECTADY, NY 12301

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

14-1682540

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

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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

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, 2001 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

TITLE VPT ☐ Delete  
 NAME MARK E. BUCHANAN  
 STREET ADDRESS 12 CORPORATE WOODS BLVD  
 CITY - ST - ZIP ALBANY NY 12211

TITLE VPAT ☒ Delete  
 NAME GEDIA DEMARIA  
 STREET ADDRESS 12 CORPORATE WOODS BLVD  
 CITY - ST - ZIP ALBANY NY 12211

TITLE VPS ☐ Delete  
 NAME ROBERT E. HEALING  
 STREET ADDRESS 3135 EASTON TURNPIKE  
 CITY - ST - ZIP FAIRFIELD CT 06431

TITLE PD ☐ Delete  
 NAME JAMES R. BUNT  
 STREET ADDRESS 3135 EASTON TURNPIKE  
 CITY - ST - ZIP FAIRFIELD CT 06431

TITLE DVP ☐ Delete  
 NAME PHILIP D. AMEEN  
 STREET ADDRESS 3135 EASTON TURNPIKE  
 CITY - ST - ZIP FAIRFIELD CT 06431

TITLE AS ☐ Delete  
 NAME ELIZA W. FRASER  
 STREET ADDRESS 3135 EASTON TURNPIKE  
 CITY - ST - ZIP FAIRFIELD CT 06431

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

TITLE VPAT ☐ Change ☒ Addition  
 NAME BARBARA A. MELITA  
 STREET ADDRESS 12 CORPORATE WOODS BLVD  
 CITY - ST - ZIP ALBANY NY 12211

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

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

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

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

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: *Barbara A. Melita*

VP & ASST. TREASURER

4/18/01 518-433-4337

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**A0062196**

DO NOT WRITE IN THIS SPACE