

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # V15353

1. Entity Name

NORTH STAR LEASING, INC.

**FILED**  
**Mar 07, 2000 8:00 am**  
**Secretary of State**

03-07-2000 90078 036 \*\*\*150.00

Principal Place of Business

Mailing Address

PERFORMANCE ROAD  
NC 28115

302 PERFORMANCE ROAD  
MOORESVILLE NC 28115-9592  
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

59-3107080

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

RUARK, SHARON  
22 ARCHER RD  
YULEE FL 32097

Name

MEREDITH W. RUARK

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

8144 FIRST COAST HIGHWAY

APT. 206

City

FERNANDINA BEACH

FL

Zip Code

32034

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

MEREDITH W. RUARK, VP

*[Signature]*

2/2/00

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 PD ☐ Delete  
NAME RUARK, SHARON  
STREET ADDRESS 22 ARCHER ROAD  
CITY-ST-ZIP YULEE FL 32097

TITLE ☒ Change ☐ Addition  
NAME ☒ Change ☐ Addition  
STREET ADDRESS 158 GOLF HILL ROAD, PO BOX 135B  
CITY-ST-ZIP MOORESVILLE, NC 28115

TITLE VPD ☐ Delete  
NAME RUARK, MEREDITH W  
STREET ADDRESS P.O. BOX 687 N/A  
CITY-ST-ZIP MADISON FL

TITLE ☒ Change ☐ Addition  
NAME ☒ Change ☐ Addition  
STREET ADDRESS 8144 FIRST COAST HIGHWAY, APT. 206 (PO BOX 458)  
CITY-ST-ZIP FERNANDINA BEACH, FL 32034

TITLE STD ☐ Delete  
NAME STANLEY, MARK J  
STREET ADDRESS 34 ALIDA AVE.  
CITY-ST-ZIP BINGHAMTON NY

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

TITLE D ☐ Delete  
NAME HEALEY, PATRICK  
STREET ADDRESS 11 CHAPEL ST  
CITY-ST-ZIP PITISTON PA

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MARK J. STANLEY, SEC/TREAS

Date

3/3/00

Daytime Phone #

(570) 833-2583

CR2E034 (9/99)