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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 804012

(3)

DOUGLAS-GUARDIAN SERVICES CORPORATION

Principal Place of Business

1155 DAIRY ASHFORD.. #201 HOUSTON TX 77079

2. Principal Place of Business

Mailing Address

2a. Mailing Address

1155 DAIRY ASHFORD., #201 HOUSTON TX 77079

US

FILED
Jan 30 1998 8:00am
Secretary of State



DO NOT WRITE IN THIS SPACE

Applied For

 Date Incorporated or Qualified 05/13/1932

4. FEI Number

| 21 | | 26 | | | 72-0172580 | | Nc | t Applicable | , |
|--------------------------|---|----------------------------------|-----------------|--|---|-------------|---------------|--------------|-----------------|
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | 5. Certificate of Status Desired |)XI | \$8.75 | | 1 |
| 22 | | 27 | | | G. Continents of Change Desired | <u> </u> | Fee Re | quired | _ |
| City & State | | City & State | | | 6. Election Campaign Financing | _ | \$5.00 | | |
| 23 | Country | 28 | | | Trust Fund Contribution | | Added t | | _ |
| Zip | | | Count | or This doubling out of the ball the ballent year | | _ ' | angible No | | |
| 24 | 25 9. Name and Address of Current I | 30 | • | Personal Property Tax due June 10. Name and Address of New Re | | | ₹ 140 | - | |
| CT CORPORATION SYSTEM | | | | 1 Name | 10, radio are Address of field 10 | .giotatea r | (gerit | | - |
| 1200 S. PINE ISLAND ROAD | | | | | | | | | _[|
| PLANTATION FL 33324 | | | 82 | 2 Street Addr | ess (P.O. Box Number is Not Accepta | ole) | | | |
| 1 BAILMON I C 00024 | | | | 3 | | | | - | - |
| | | | | | | | | | ╛ |
| | | | 84 | 4 City | | FL | 85 Zip (| Code | Ī |
| 11. Pursuant | to the provisions of Sections 607.0502 | and 607.1508, Florida Statute | es, the above | ve-named corp | oration submits this statement for the | ourpose of | changing it | s registered | - |
| office or r | egistered agent, or both, in the State of m familiar with, and accept the obligation | Florida. Such change was a | authorized b | by the corporati | ion's board of directors. I hereby acce | pt the appo | intment as | registered | |
| • | an ambar with and accept the congain | Als 01, Octobri 001.0000, Fic | nida Otatote | 5 5. | | | | | |
| SIGNATURE | Signature, typed or printed name of registered agent a | nd litte if applicable. (NOTI | . Registered Ag | gent signature require | ed when reinstating) | DATE | | | |
| 12. | OFFICERS AND DIRECTORS | | 13. | | ADDITIONS/CHANGES TO OFFI | DERS AND | DIRECTOR | S IN 12 | CR2E034 (10/97) |
| TITLE | SD | DELETE 1.1 1 | | | | | Change | Addition |]은 |
| NAME | LEONARD, MARGOT D | | 1.2 NAME | : | | | | | 4 |
| STREET ADDRESS | 1155 DAIRY ASHFORD #201 | | 1.3 STREE | ET ADDRESS | | | | | |
| CITY-ST-ZIP | HOUSTON TX | 1,41 | | ST-ZIP | | | | | 띯 |
| TITLE | PD | DELETE | 2.1 TITLE | | | | Change | Addition |]Շ |
| NAME | LURIE, BRUCE E | | 2.2 NAME | | | | | | 1 |
| STREET ADDRESS | 1155 DAIRY ASHFORD., #201 | | 2.3 STREE | ET ADDRESS | | | | | 1 |
| CITY-ST-ZIP | HOUSTON TX | | 2. 4 CITY | -ST-ZIP | | | | | İ |
| TITLE | SVP | DELETE | 3.1 TITLE | | | | Change | Addition | 1 |
| NAME | POPE, RONNIE L | | 3.2 NAME | | | | | | |
| STREET ADDRESS | 1155 DAIRY ASHFORD., #201 | | 3.3 STREE | T ADDRESS | | | | | |
| CITY - ST - ZIP | HOUSTON TX | | 3.4. CITY- | -ST-ZIP | | | | | |
| TITLE | ATAS | | | | | | Change | Addition | 1 |
| NAME | reeves, debra f | | 4, 2 NAME | | | | | | |
| STREET ADDRESS | 1155 Dairy Ashford., #201 | | 4.3 STREE | T ADDRESS | | | | | 1 |
| City-St-ZiP | HOUSTON TX 77079 | | 4.4 CITY- | ST-ZIP | | | | | 1 |
| TITLE | SVP | ☐ DELETE | 5.1 TITLE | | £- | | Change | Addition | 1 |
| NAME | RYAN, JOHN F | | 5.2 NAME | | | | | | |
| STREET ADDRESS | 1155 DAIRY ASHFORD, #201 | | 5.3 STREE | T ADDRESS | · | | | | |
| CITY-ST-ZIP | LIGHTON TV 77070 | | 5.4 CITY- | ST-ZIP | • • • | | | | |
| TITLE | | ☐ DELETE | 6.1 TITLE | | |] | Change | Addition | 1 |
| NAME | | | 6.2 NAME | | | | | | |
| STREET ADDRESS | | | 6.3 STREE | T ADDRESS | | | | | |
| CITY-ST-ZIP | | | 6.4 CITY- | ST-ZIP | | | | | |
| 14. I hereby o | ertify that the information supplied with | this filling does not qualify to | r the exemp | ption stated in S | Section 119.07(3)(i), Florida Statutes. I | further cer | tify 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.

CNATURE: ALIGNATURE ROEDIUFREVES

1/2/92

(281)53-0500