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PROFIT CORPORATION ANNUAL REPORT

1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **850250**

1. Corporation Name
H. C. PRICE CO.

Principal Place of Business	Mailing Address
5353 ALPHA ROAD DALLAS TX 75240	5353 ALPHA ROAD DALLAS TX 75240

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed: 08/21/1981

2. Principal Place of Business	2a. Mailing Address
21 15660 N Dallas Parkway	26 15660 N Dallas Parkway
Suite, Apt. #, etc. 22 Suite 300	Suite, Apt. #, etc. 27 Suite 300
City & State 23 Dallas TX	City & State 28 Dallas TX
Zip / Country 24 75248 / 25 USA	Zip / Country 29 75248 / 30 USA

4. FEI Number: 73-1103884 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	☐ DELETE	1.1 TITLE		☒ Change ☐ Addition
NAME	WHITE, J THOMAS		1.2 NAME		
STREET ADDRESS	5353 ALPHA ROAD		1.3 STREET ADDRESS	15660 N Dallas Prkwy #300	
CITY-ST-ZIP	DALLAS TX		1.4 CITY-ST-ZIP	Dallas TX 75248	
TITLE	CD	☐ DELETE	2.1 TITLE		☒ Change ☐ Addition
NAME	PRICE, H. CHARLES		2.2 NAME		
STREET ADDRESS	5353 ALPHA ROAD		2.3 STREET ADDRESS	15660 N Dallas Prkwy #300	
CITY-ST-ZIP	DALLAS TX		2.4 CITY-ST-ZIP	Dallas TX 75248	
TITLE	VST	☐ DELETE	3.1 TITLE		☒ Change ☐ Addition
NAME	LEWIS, VICKI L.		3.2 NAME		
STREET ADDRESS	5353 ALPHA ROAD		3.3 STREET ADDRESS	15660 N Dallas Prkwy #300	
CITY-ST-ZIP	DALLAS TX		3.4 CITY-ST-ZIP	Dallas TX 75248	
TITLE	SR VP	☐ DELETE	4.1 TITLE	SR VP	☐ Change ☒ Addition
NAME	CLYDE S. HARDWICK, JR		4.2 NAME	Clyde S. Hardwick Jr	
STREET ADDRESS	15660 N. Dallas Pkwy #300		4.3 STREET ADDRESS	15660 N. Dallas Prkwy #300	
CITY-ST-ZIP	Dallas TX		4.4 CITY-ST-ZIP	Dallas TX 75248	
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E034 (11/98)

14. 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 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.

SIGNATURE: J. J. White 4-23-99 972-858-8800
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #