

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F95000002382 (8)

1. Corporation Name

YES FINANCIAL INC.



Principal Place of Business

700 N. PEARL ST., #1940
DALLAS TX 75201

Mailing Address

700 N. PEARL ST., #1940
DALLAS TX 75201

2. Principal Place of Business

21

Suite, Apt. #, etc.

P.O. Box 659

City & State

DALLAS, TX.

Zip

75221

Country

DALLAS

2a. Mailing Address

26

Suite, Apt. #, etc.

P.O. Box 659

City & State

DALLAS, TX.

Zip

75221

Country

DALLAS

3. Date Incorporated or Qualified

05/11/1995

3a. Date of Last Report

5-1-95

4. FEI Number

33-0436496

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 has liability for intangible tax under s. 199.032,
Florida Statutes.

☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

81. Name

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

83

200001893082
-07/15/96--01009--018

84. City

***450.00

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1505, 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

Signature typed or printed name of registered agent and the name and address of the registered agent.

Signature typed or printed name of corporation and the name and address of the corporation.

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-STATE-ZIP

PCEO
THAXTON, BILL
700 N. PEARL ST., #1940
DALLAS TX 75201

☒ DELETE

V
CONNOR, SCOTT
700 N. PEARL ST., #1940
DALLAS TX 75201

☐ DELETE

V
NARAN, HARISH
700 N. PEARL ST., #1940
DALLAS TX 75201

☐ DELETE

VTS
WHITAKER, ROBERT E
700 N. PEARL ST., #1940
DALLAS TX 75201

☐ DELETE

V
SWIRE, ROBERT
700 N. PEARL ST., #1940
DALLAS TX 75201

☐ DELETE

D
MCGONIGLE, J O
700 N. PEARL ST., #1940
DALLAS TX 75201

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE NAME STREET ADDRESS CITY-STATE-ZIP

DIRECTOR
GARY COPPINGER
P.O. Box 659 600 N. Pearl St. #2000
DALLAS, TX. 75201

☐ Change ☒ Addition

2. TITLE NAME STREET ADDRESS CITY-STATE-ZIP

600 N. Pearl St. Suite 2000
Dallas, Tx 75201
PRESIDENT

☒ Change ☐ Addition

3. TITLE NAME STREET ADDRESS CITY-STATE-ZIP

600 N. Pearl St. Suite 2000
Dallas, Tx 75201

☒ Change ☐ Addition

4. TITLE NAME STREET ADDRESS CITY-STATE-ZIP

600 N. Pearl St. Suite 2000
Dallas, Tx 75201

☒ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(g), Florida Statutes. Further, I 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/31/96

6214777-4708

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