

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 # **F95000004131 (7)**

1. Corporation Name
PROTECT AMERICA, INC. OF TEXAS



Principal Place of Business: **1206 PALM VALLEY BLVD ROUND ROCK TX 78664**
Mailing Address: **1206 PALM VALLEY BLVD ROUND ROCK TX 78664**

2. Principal Place of Business: **21 No location yet**
22 City & State
23 Zip
24 Country
25
2a. Mailing Address: **26 1206 Palm Valley Blvd**
27 City & State
28 **Round Rock, TX**
29 **78664**
30 **USA**

3. Date Incorporated or Qualified: **08/25/1995**
3a. Date of Last Report
4. FEI Number: **74-2648729**
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

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324**

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code: **FL**

11. Pursuant to the provisions of Sections 607.0509 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

Signature types: corporate officer, registered agent, authorized signatory

PROF: Registered Agent signature (used when re-registering)

DATE

OFFICERS AND DIRECTORS

12. OFFICERS AND DIRECTORS

12.1 NAME	DCP BOWMAN, TURNER	<input type="checkbox"/> DELETE
12.2 STREET ADDRESS	2515 BOARDWALK	
12.3 CITY-ST-ZIP	SAN ANTONIO TX 78217	
12.4 TITLE	DCVS	<input type="checkbox"/> DELETE
12.5 NAME	PASCHALL, THAD	
12.6 STREET ADDRESS	8668 SPICEWOOD SPRINGS #200	
12.7 CITY-ST-ZIP	SAN ANTONIO TX 78759	
12.8 TITLE		<input type="checkbox"/> DELETE
12.9 NAME		
12.10 STREET ADDRESS		
12.11 CITY-ST-ZIP		
12.12 TITLE		<input type="checkbox"/> DELETE
12.13 NAME		
12.14 STREET ADDRESS		
12.15 CITY-ST-ZIP		
12.16 TITLE		<input type="checkbox"/> DELETE
12.17 NAME		
12.18 STREET ADDRESS		
12.19 CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.2 NAME	
13.3 STREET ADDRESS	
13.4 CITY-ST-ZIP	
13.5 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.6 NAME	
13.7 STREET ADDRESS	
13.8 CITY-ST-ZIP	
13.9 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.10 NAME	
13.11 STREET ADDRESS	
13.12 CITY-ST-ZIP	
13.13 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.14 NAME	
13.15 STREET ADDRESS	
13.16 CITY-ST-ZIP	
13.17 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.18 NAME	
13.19 STREET ADDRESS	
13.20 CITY-ST-ZIP	

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)(k), 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.

SIGNATURE: **Thad Paschall, VP. 1-18-96** 512-218-8833
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)