

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1999



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

FILED
Sep 21, 1999 8:00 am
Secretary of State

09-21-1999 90022 012 ***550.00

DOCUMENT # **F97000003274**

1. Corporation Name

2660 GULF TO BAY BOULEVARD, INC.

Principal Place of Business

**314 MAINE
STE. #3
LEWISVILLE TX 75027
US**

Mailing Address

**P.O. BOX 293295
LEWISVILLE TX 75029
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/23/1997

4. FEI Number

75-2513540

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.



Yes



No

2. Principal Place of Business

21 8008 Cedar Springs Rd

Suite, Apt. #, etc.

22 Suite #100

City & State

23 DALLAS TX

Zip

24 75235

Country

25 USA

2a. Mailing Address

26 P.O. Box 36122

Suite, Apt. #, etc.

27

City & State

28 DALLAS, TX TEXAS

Zip

29 75235

Country

30 USA

9. Name and Address of Current Registered Agent

**NRAI - SERVICES, INC.
526 E. PARK AVE.
TALLAHASSEE FL 32301**

10. Name and Address of New Registered Agent

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **PD** ☒ DELETE
NAME **DIMEO, STEVE**
STREET ADDRESS **12655 N. CENTRAL EXPY., #710**
CITY-STATE-ZIP **DALLAS TX 75243**

TITLE **VS** ☒ DELETE
NAME **TRÉVINO, OSCAR JR**
STREET ADDRESS **12655 N. CENTRAL EXPY., #710**
CITY-STATE-ZIP **DALLAS TX 75243**

TITLE **D** ☐ DELETE
NAME **LAWHORNE, DONALD R**
STREET ADDRESS **12655 N. CENTRAL EXPY., #710**
CITY-STATE-ZIP **DALLAS TX 75243**

TITLE **T** ☒ DELETE
NAME **DONALD A. THEESFELD**
STREET ADDRESS **314 W. MAINE STE. #3**
CITY-STATE-ZIP **LEWISVILLE TX 75057**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-STATE-ZIP

President ☒ Change ☐ Addition
SAM TALKINGTON
8008 Cedar Springs, Suite 100
DALLAS, TX 75235

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-STATE-ZIP

☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-STATE-ZIP

☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-STATE-ZIP

☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-STATE-ZIP

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-STATE-ZIP

☐ Change ☐ Addition

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.

SIGNATURE:

Sam Talkington
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9-8-99

Date

214-351-0054

Daytime Phone #

0120290

CR2E034 (5/99)