## 2000 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # **F98000002245** May 01, 2000 8:00 am Secretary of State NATIONAL SPIRIT GROUP CORPORATION 05-01-2000 90314 003 \*\*\*150.00 Principal Place of Business Mailing Address 2010 MERRITT DRIVE P.O. BOX 660359 DALLAS TX 75266-0359 GARLAND TX 75041 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 75-2737680 Not Applicable Country \$8.75 Additional Zip Country Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. **SIGNATURE** DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11. ☐ Addition Change Delete TITLE TITI F NAME TINSLEY, MICHAEL G NAME 2010 MERRITT DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP GARLAND TX 75041 ☐ Addition ☐ Change ☐ Delete TITLE . TITLE NAME RAGSDALE, JOHN E NAME STREET ADDRESS STREET ADDRESS 2010 MERRITT DR. CITY-ST-ZIP CITY-ST-7IP **GARLAND TX 75041** Change ☐ Addition Delete TITLE TITLE NAME HAGER, FREDERICK H NAME STREET ADDRESS STREET ADDRESS 2010 MERRITT DR. CITY-ST-ZIP CITY-ST-7IP **GARLAND TX 75041** Addition ☐ Delete ☐ Change TITLE EASTERLING, V EDWARD JR NAME NAME STREET ADDRESS STREET ADDRESS 2010 MERRITT DR. CITY-ST-ZIP CITY-ST-ZIP **GARLAND TX 75041** ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME DECKER, MIKE NAME STREET ADDRESS STREET ADDRESS 2010 MERRITT DR. CITY-ST-7IP CITY-ST-ZIP **GARLAND TX 75041** Change ☐ Delete TITLE Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

3/14/00 (972)840-1233