


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 30, 2005 08:00 AM
Secretary of State

DOCUMENT # F99000005871 1. Entity Name CHR SOLUTIONS, INC.	
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Principal Place of Business
2711 LBJ FREEWAY, SUITE 560
DALLAS, TX 75234-7321

Mailing Address
PO BOX 65700
LUBBOCK, TX 79464

DO NOT WRITE IN THIS SPACE



04252005 No Chg-P CR2E034 (10/03)

4. FEI Number 75-1169463	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

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

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

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

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD OVERMAN, W R 4747 S LOOP 289 LUBBOCK, TX 79424
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PDC HUTTON, C. ROGER 2711 LBJ FREEWAY, SUITE 560 DALLAS, TX 752347321
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PSD CATHEY, CONLEY 2711 LBJ FREEWAY, SUITE 560 DALLAS, TX 752347321
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MOORE, BARRY 4747 SOUTH LOOP 289 LUBBOCK, TX 79424
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T PATTERSON, MARK 2711 LBJ FREEWAY, STE 560 DALLAS, TX 752347321
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P FLEMING, GARY 2711 LBJ FREEWAY, STE. 560 DALLAS, TX 752347321

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05/02/05-80039-013 150.00

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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  Rick Overman, Corporate Officer 4-25-05 806-722-7700
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #