

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****May 02, 2001 8:00 am**
Secretary of State

05-02-2001 90038 028 ***150.00

DOCUMENT # H24291

1. Entity Name

PEBBLE CREEK SERVICE CORPORATION

Principal Place of Business

**19651 BRUCE B. DOWNS
SUITE A 1-5
TAMPA FL 33647
US**

Mailing Address

**2929 ALLEN PKWY
A36-01
HOUSTON TX 77019
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-2478284**

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

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

Name

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

City

FL

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐**FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State**10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00 May Be
Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **VP** ☐ Delete
NAME **MASK, W. LARRY**
STREET ADDRESS **2929 ALLEN PKWY**
CITY-ST-ZIP **HOUSTON TX 77019**TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE **S** ☐ Delete
NAME **NEIGHBORS, PATRICIA W.**
STREET ADDRESS **2929 ALLEN PKWY**
CITY-ST-ZIP **HOUSTON TX 77019**TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE **T** ☒ Delete
NAME **SOUFAN, JAMILEH B**
STREET ADDRESS **2929 ALLEN PKWY**
CITY-ST-ZIP **HOUSTON TX**TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE **S** ☐ Delete
NAME **MILLER, SUSAN G**
STREET ADDRESS **2929 ALLEN PKWY**
CITY-ST-ZIP **HOUSTON TX 77019**TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
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.

SIGNATURE:

Susan G. Miller
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Susan G. Miller

Date

Daytime Phone #

4/23/01 713/831-1078

CR2E034 (10/00)

American

General

FINANCIAL GROUP

2929 Allen Parkway (A40-04), Houston, Texas 77019

Attachment

835523

H 24291

Krista M. Boaz

Legal Assistant

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FAX (713) 831-1106

E-mail: krista_boaz@valic.com

April 26, 2001

FEDERAL EXPRESS, NEXT DAY DELIVERY

State of Florida
Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, Florida 32302-1500

Re: 2000 State of Florida Uniform Business Reports

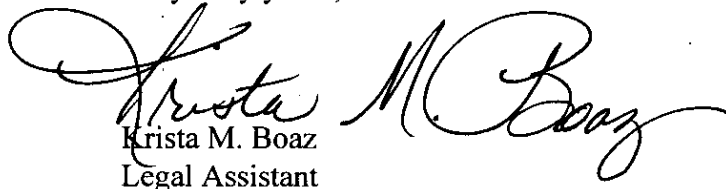
Dear Sir or Madam:

On behalf of American General Financial Group I am enclosing executed copies of the State of Florida Annual Uniform Business Report along with payments to cover the annual filing fee for the following entity:

Pebble Creek Service Corporation

Please acknowledge receipt of this letter and the enclosures by date stamping the enclosed copy of this letter and returning it in the pre-addressed, postage paid envelope provided for your convenience. If you have any questions regarding this matter, please call the undersigned at the above-referenced telephone number.

Very truly yours,


Krista M. Boaz
Legal Assistant

encl.