

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 04, 2002 8:00 am
Secretary of State

02-04-2002 90049 045 ***150.00

DOCUMENT # P21530

1. Entity Name
WESTGATE FABRICS, INC.

Principal Place of Business 1000 FOUNTAIN PARKWAY P.O. BOX 534038 GRAND PRAIRIE TX 75053-1038	Mailing Address 1000 FOUNTAIN PARKWAY P.O. BOX 534038 GRAND PRAIRIE TX 75053-1038
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address		4. FEI Number 75-0706564		Applied For <input type="checkbox"/> Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
City & State		City & State		Zip		Country	

6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent							
THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301				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 _____ (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) <input type="checkbox"/>	FILE NOW!!! FEE IS \$150.00 After May 1, 2002 Fee will be \$550.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE VP	NAME KNIGHT, MARK S	<input checked="" type="checkbox"/> Delete	TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 1000 FOUNTAIN PKWY	CITY-ST-ZIP GRAND PRAIRIE TX		STREET ADDRESS	CITY-ST-ZIP	
TITLE V	NAME WRIGHT, JOHN C	<input checked="" type="checkbox"/> Delete	TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 1000 FOUNTAIN PARKWAY	CITY-ST-ZIP GRAND PRAIRIE TX		STREET ADDRESS	CITY-ST-ZIP	
TITLE DF	NAME CLEAVE, CHUCK V	<input type="checkbox"/> Delete	TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 1000 FOUNTAIN PKWY	CITY-ST-ZIP GRAND PRAIRIE TX		STREET ADDRESS	CITY-ST-ZIP	
TITLE VT	NAME HARPSTER, BRIAN	<input type="checkbox"/> Delete	TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 1000 FOUNTAIN PARKWAY	CITY-ST-ZIP GRAND PRAIRIE TX		STREET ADDRESS	CITY-ST-ZIP	
TITLE P	NAME CASSEN, J. JAY	<input type="checkbox"/> Delete	TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 1000 FOUNTAIN PARKWAY	CITY-ST-ZIP GRAND PRAIRIE TX		STREET ADDRESS	CITY-ST-ZIP	
TITLE	NAME	<input type="checkbox"/> Delete	TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	CITY-ST-ZIP		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: *John C Wright* **SIGNATURE REQUIRED** 1/8/2002 Date Daytime Phone #

CR2E034 (9/01)