

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P95000018073**

Entity Name

2111 WILSON BOULEVARD INC.**FILED****Mar 19, 2001 8:00 am**
Secretary of State

03-19-2001 90500 009 ***150.00

Principal Place of Business

**1801 HERMITAGE BOULEVARD
SUITE 600
TALLAHASSEE FL 32308**

Mailing Address

**1801 HERMITAGE BOULEVARD
SUITE 600
TALLAHASSEE FL 32308****00026942**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **75-2584802**

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**DAVID E. TODD
1801 HERMITAGE BOULEVARD
STE 100
TALLAHASSEE FL 32308**

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 **D** ☐ Delete
NAME **BENNETT, DOUGLAS W**
STREET ADDRESS **1801 HERMITAGE BLVD., STE 100**
CITY-ST-ZIP **TALLAHASSEE FL**TITLE **DVAT** ☒ Change ☐ Addition
NAME **Lynne M. Gray**
STREET ADDRESS **1801 Hermitage Blvd., Suite 600**
CITY-ST-ZIP **Tallahassee, FL 32308**TITLE **VS** ☒ Delete
NAME **DALEY, EDWARD**
STREET ADDRESS **8750 N CENTRAL EXPRESSWAY, SUITE 800**
CITY-ST-ZIP **DALLAS TX 75231-6437**TITLE **VS** ☐ Change ☒ Addition
NAME **Mark Faraldo**
STREET ADDRESS **8750 N. Central Expressway, Suite 800**
CITY-ST-ZIP **Dallas, TX 75231**TITLE **P** ☐ Delete
NAME **SMITH, G. ANDREWS**
STREET ADDRESS **8750 N. CENTRAL EXPRESSWAY, SUITE 800**
CITY-ST-ZIP **DALLAS TX 75231-6437**TITLE **V** ☒ Change ☐ Addition
NAME **Edward Daley**
STREET ADDRESS **8750 N. Central Expressway, Suite 800**
CITY-ST-ZIP **Dallas, TX 75231**TITLE **DVAS** ☐ Delete
NAME **HORTON, JAMES**
STREET ADDRESS **1801 HERMITAGE BOULEVARD, SUITE 600**
CITY-ST-ZIP **TALLAHASSEE FL 32308**TITLE **VAS** ☐ Change ☒ Addition
NAME **Regina Weaver**
STREET ADDRESS **8750 N. Central Expressway, Suite 800**
CITY-ST-ZIP **Dallas, TX 75231**TITLE **VT** ☒ Delete
NAME **WELCH, V MARK**
STREET ADDRESS **8750 N CENTRAL EXPRESSWAY, SUITE 800**
CITY-ST-ZIP **DALLAS TX 75231-6437**TITLE **VT** ☐ Change ☒ Addition
NAME **Mark G. Gerigk**
STREET ADDRESS **8750 N. Central Expressway, Suite 800**
CITY-ST-ZIP **Dallas, TX 75231**TITLE **DVAT** ☒ Delete
NAME **QUICK, LYNNE**
STREET ADDRESS **1801 HERMITAGE BOULEVARD, SUITE 600**
CITY-ST-ZIP **TALLAHASSEE FL 32308**TITLE ☐ 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: **Douglas W. Bennett, Director**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

850/488-4406

Daytime Phone #

CR2E034 (10/00)