

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 07, 2002 8:00 am
Secretary of State

05-07-2002 90385 048 ****50.00

DOCUMENT # MO0000001325

1. Entity Name

WARMACK AND COMPANY, L.L.C.

Principal Place of Business

**650 CENTRAL MALL
 TEXARKANA TX 75503-2497**

Mailing Address

**650 CENTRAL MALL
 TEXARKANA TX 75503-2497**

2. Principal Place of Business

30 MORRIS LANE

3. Mailing Address

30 MORRIS LANE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

TEXARKANA, TX

City & State

TEXARKANA, TX

Zip

Country

75503-2115

USA

Zip

Country

75503-2115

USA

4. FEI Number

75-2795888

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
 Fee Required

6. Name and Address of Current Registered Agent

**ABERNATHY JR, BRUCE R
 900 VIRGINIA AVE., STE 6
 FORT PIERCE FL 34982**

7. Name and Address of New Registered Agent

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

**FILE NOW!!! FEE IS \$50.00
 Make Check Payable to Department of State
 Due By May 1, 2002**

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE **P** ☐ Delete
 NAME **WARMACK, ED**
 STREET ADDRESS **650 CENTRAL MALL**
 CITY-ST-ZIP **TEXARKANA TX 75503**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **V** ☐ Delete
 NAME **WARMACK, GEORGE**
 STREET ADDRESS **650 CENTRAL MALL**
 CITY-ST-ZIP **TEXARKANA TX 75503**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **V** ☐ Delete
 NAME **WARMACK, JOHN**
 STREET ADDRESS **650 CENTRAL MALL**
 CITY-ST-ZIP **TEXARKANA TX 75503**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **V** ☐ Delete
 NAME **WARMACK, JAMES**
 STREET ADDRESS **650 CENTRAL MALL**
 CITY-ST-ZIP **TEXARKANA TX 75503**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **V** ☐ Delete
 NAME **WARMACK, DANIEL**
 STREET ADDRESS **650 CENTRAL MALL**
 CITY-ST-ZIP **TEXARKANA TX 75503**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

DANIEL WARMACK

SIGNATURE:

SIGNATURE REQUIRED

VICE-PRESIDENT

4/23/02

903-838-4000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

CR2E083 (9/01)