Mailing Address



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 167534

1. Corporation Name

Principal Place of Business

FIRST FAMILY FINANCIAL SERVICES, INC.

250 CARPENTER FREEWAY IRVING TX 75062 US		P.O. BOX 660237 CORP TAX DEPT DALLAS TX 75266-0237 US					DO NOT WRITE IN THIS SPACE 3. Date ir corporated or Qualifed 12/28/1951					
2 Datasias Di	and of Business	2a. Mailing Address				4. FEI N			- 1	Ann	ied For	
	ace of Business	26					59-0714560			Not Applicable		
Suite, Apt.	# etc.	Suite, Apt. #, etc.							\$8.7	8.75 Additional		
22		27			5. Certifo	ate of Status Desired		Fe	e Req	uired		
City & S at		City & State				6. Election	n Campaign Financing		\$5.	00 M	av Be	
23		28				· ·	und Contribution			ded to	, I	
Zip	Country	Zip	Coul	ntry		8. This c	rporation owes the curr	ent year Inta	ngible			
24	25	29	30				Personal Property Tax. Yes [] No					
	9. Name and Add ess of Current	Registered Agent				10. Name	and Address of New F	Registere 1 /	Agent			
	PREMINOS MANA CORDODATION	OVOTEN INO		81	Name							
	PRENTICE-HALL CORPORATION	SYSTEM INC.		82	Street	Address (P.O. Box	ddress (P.O. Box Number is Not Acceptable)					
	HAYS STREET											
SUITE 105 TALLAHASSEE FL 32301			ļ	83							1	
IALL	ANASSEE FL 32301			84	City				85	Zip Co	de	
					·			<u> </u>	Щ.			
office or n	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligati	il Florida, Such change was	authorized	D۷	the corb	corporation subm oration's board of	its this statement for the cirectors. I hereby accep	ot the appoir	changin ntment a	as regi	stered	
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NO	TI:: Registered	Agen	it signature	required when reinstating		DATE		_		
12.	OFFICERS AND	· — · · · · — · — — — — — — — — — — — —	13.			ADDITI	(INS/CHANGES TO OF	FICERS AN			S IN 12	
TITLE	PD	DELETE	1.1 717	T.E			0 10 5		□ /Cha	inge	Addition	
NAME	CHALMERS, ALAN		1.2 NA	ME		maples	Ronald S.					
STREET ADDRESS	4362 PEACHTREE RD NE		13 ST	REET	ADORESS	, ,						
CITY-ST-ZIP	ATLANTA GA		1.4 CF	TY-S1	T-ZIP							
TITLE	VPT	☐ DELETE	2.1 TΠ	ΙLΕ					☐ Cha	inge	☐ Addition	
NAME	HUGHES, JOHN		2 2 NA	ME								
STREET ADDRESS	250 CARPENTER FREEWAY		2.3 ST	REET	ADDRESS							
CITY-ST-ZIP	IRVING TX		2. 4 CI	TY-S	T-ZIP	<u> </u>						
TITLE	S	✓ DELETE	3 1 7/7	ſLΕ		1			□Æha	nge	Addition	
NAME	HAYES, TIMOTHY		3.2 NA	ME		1-15/cow,	frederic c.					
STREET ADDRESS	250 CARPENTER FREEWAY		3.3 ST	REET	ADDRESS							
CITY-ST-ZiP	IRVING TX		3.4. CI	TY-S	T-ZIP	<u> </u>						
TITLE	AVAS	☐ DELETE	4 1 TIT	ΠE					☐ Cha	inge	Addition	
NAME	GREENE, PATRICK J		4.2 N	AME							1	
STREET ADDRESS	250 CARPENTER FREEWAY		4.3 ST	REET	F ADDRESS							
CITY-ST-ZIP	IRVING TX		4.4 Cl		T-ZIP	<u> </u>						
TITLE	D	☐ DELETE	5.1 777			isto Hen	michael w.		_ √ Cha	ange	☐ Addition	
NAME	JAMES S. JOHNSON		5.2 NA			I	A CARDO MANAGEMENT				ļ	
STREET ADDRESS	250 CARPENTER FREEWAY		1		ADDRESS]	
CITY-ST-ZIP	IRVING TX	- 	5 4 CF		T-ZIP	<u> </u>					- Address	
TITLE	D	☐ DELETE	6 1 TIT						Cha	ange	Addition	
NAME	Longenecker, Chester D		6.2 NA								i	
STREET ADDRESS	250 CARPENTER ERFEWAY		6.3 ST	REET	TADDRESS						i	

14. Thereby 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 annual report or supplemental ε innual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I εm an officer or director of the corporation or the receiver or trustee empowered to εxecute this report as the corporation of the corporation or the receiver or trustee empowered to εxecute this report as the corporation of the corporation or the receiver or trustee empowered to εxecute this report as the corporation of the corporation or the receiver or trustee empowered to εxecute this report as the corporation of the corporation or the receiver or trustee empowered to εxecute this report as the corporation of the corporation or the receiver or trustee empowered to εxecute this report as the corporation of the corporation or the receiver or trustee empowered to εxecute this report as the corporation of the corporation or the receiver or trustee empowered to εxecute this report as the corporation of the corporation or the receiver or trustee empowered to εxecute this report as the corporation of the corporation or the receiver or trustee empowered to εxecute this report as the corporation of the corporation or the receiver or trustee empowered to εxecute this report as the corporation of the corporation or the receiver or trustee empowered to εxecute this report as the corporation of the corporation of the corporation or trustee empowered to εxecute this report as the corporation of the corporation o ASS'T VICE PRESIDENT

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

SIGNATURE AND TYPED ARTEN

& ASS'T SECRETARY

FILED Apr 27, 1999 8:00 am Secretary of State

04-27-1999 90017 020 ***150.00