

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 07, 2003 8:00 am
Secretary of State

03-07-2003 90143 050 ***158.75

DOCUMENT # 829331

1. Entity Name
TEXAS PGI, INC.



Principal Place of Business
**8214 WESTCHESTER
9TH FLOOR
DALLAS TX 75225
US**

Mailing Address
**8214 WESTCHESTER
9TH FLOOR
DALLAS TX 75225
US**



☒ CHECK HERE IF MAKING CHANGES

| | | | | | | |
|--------------------------------|---------|---------------------|---------|--|--|---------------------------------------|
| 2. Principal Place of Business | | 3. Mailing Address | | 4. FEI Number 75-1393275 | | Applied For |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | | Not Applicable |
| City & State | | City & State | | 5. Certificate of Status Desired <input checked="" type="checkbox"/> | | \$8.75 Additional Fee Required |
| Zip | Country | Zip | Country | | | |

6. Name and Address of Current Registered Agent

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

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. I am familiar with, and accept the obligations of registered agent.

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 \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

| 10. OFFICERS AND DIRECTORS | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | |
|--|--|---|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PC COOPER, WILLIAM R 10000 N CENTRAL EXPWY STE 1150 DALLAS TX 75231 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 8214 WESTCHESTER, 9th FLOOR DALLAS TX 75225 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | STD BONNER, JERRY J 10000 N CENTRAL EXPWY STE 1150 DALLAS TX <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 8214 WESTCHESTER, 9th FLOOR DALLAS, TX 75225 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VMD LEVEY, LEWIS A 1401 SOUTH BRENTWOOD STE 675 ST. LOUIS MO 63144 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D STEVEN A. MEANS 10000 N CENTRAL EXPWY STE 1150 DALLAS TX <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 8214 WESTCHESTER, 9th FLOOR DALLAS TX 75225 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D SHINE, DON M 10000 N CENTRAL EXPWY STE 1150 DALLAS TX 75231 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 8214 WESTCHESTER, 9th FLOOR DALLAS, TX 75225 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Jerry J. Bonner
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jerry J. Bonner 3/3/03 214/360-1830

Date

Daytime Phone #

CR2E034 (10/02)