FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

1. Corporation	MENT # 83432 SON CORPORATION	29 (5)			Japanan makan maha angga junia jung	A JAN BURN BURN BURN BURN BURN BURN BURN
Principal Plac	e of Business	Mailing Address				
	KDALE DRIVE		_			a sam annu annu mittel difft fifte fifft
Committee Coloniania		4600 PARKDALE DRIV CORPUS CHRISTI TX				
					3. Date Incorporated or Qualified	3a. Date of Last Report
					05/14/1975	05/01/1995
— —	Place of Business	2a. Mailing Address		4. FEI Number	Applied For	
Suite, Apt. #, etc.		26			74-1693771	Not Applicable
22		Suite, Apt. #, etc.	Stirte, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State			City & State		& Election Compaign Figure 1	Fee Required
23		28			6. Election Campaign Financing Trust Fund Contribution	S5.00 May Be Added to Fees
Zip	Country	Zip	Country		8. This corporation has liability for in	
24	25	29	30		Florida Statutes 🔲 Yes 💹 No	
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Re	gistered Agent
DDEAD	MOT LILL CORRORATION OVER		81	Name		
1201 L	PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS STREET			Street Addr	ess (P.O. Box Number is Not Acceptable	9)
SUITE			83			
	HASSEE FL 32301					
IALLA	THOOLE I E 02001		84	City		FI 85 Zip Code
11. Pursuant	to the provisions of Sections 607.0502	2 and 607,1508, Florida Statute	s, the above n	amed corpor	ation submits this statement for the purp d of directors. I hereby accept the appoi	CL description of the registered office
familiar wi	red agent, or both, in the State of Flori ith, and accept the obligations of, Seci	ida. Such change was authorize tion 607.0505, Florida Statutes.	d by the corpo	ration's boar	d of directors. I hereby accept the appoint	intment as registered agent. I am
SIGNATURE						
				signature required	when reinstating)	DATE
Trilli	D DELETE		13.		ADDITIONS/CHANGES TO OFFIC	
NAME	DOBSON, G. W.		1.2 NAME			☐ Change ☐ Addition
STREET ADDRESS			13 STREET ADDRESS			
CITY - ST - ZIP	CORPUS CHRISTI TX		1.4 CITY-ST			
TITLE	V	V DELETE				Change Addition
NAME	MCLELLAN, J.M.		2.2 NAME			[] overigo [] Modified
STREET ADDRESS	4600 PARKDALE		2 3 STREET A	DORESS		
CITY-S1-ZIP	CORPUS CHRISTI TX			- ZIP		
TITLE	V	- Street				☐ Change ☐ Addition
NAME	BOWLING, BEVERLY		3 2 NAME			
STREET ADDRESS	4600 PARKDALE		3.3. STREET /	address.		
C/TY-ST-ZIP TITLE	CORPUS CHRISTI TX	VST DELETE		- ZIP		
NAME	CHATELAIN, C. J.	T DEFFIE				☐ Change ☐ Addition
STREET ADDRESS	4600 PARKDALE			boncos		
CITY-S1-ZIP	CORPUS CHRISTI TX		4.3 STREET A 4.4 City-St-			
TITLE	PD PD			ZIP .		☐ Change ☐ Addition
NAME	DOBSON, T. E.	5.2 N		1		☐ Change ☐ Addition
STREET ADDRESS	4600 PARKDALE	PARKDALE 5.3:		DORESS		
CHY-ST-ZIP	CORPUS CHRISTI TX		5.4 CITY - ST-			
TITLE	V DELETE 6.1		6. 1 TITLE			☐ Change ☐ Addition
NAME	ABEL, R. BRUCE		6.2 NAME			
STREE! ADDRESS	4600 PARKDALE		6.3 STREET AL	DDRESS		
CITY - ST - ZIP	CORPUS CHRISTI TX		6.4 CITY-ST-	7IP		

14. Ido hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Fiorida Statutes, I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: B walk Bowling VP + Controller
SIGNATURE AND TYPED OR PRINTED WHEN OF SIGNING OFFICER OR DIRECTOR

4/19/96 (512)878-0367