

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 850764

1. Entity Name

M.W. KELLOGG CONSTRUCTORS INC.

**FILED**  
**Jun 05, 2000 8:00 am**  
**Secretary of State**

06-05-2000 90709 022 \*\*\*150.00

Principal Place of Business

Mailing Address

601 JEFFERSON AVENUE  
ATTN: TAX DEPARTMENT  
HOUSTON TX 77002-7990  
US

4100 CLINTON DR  
ATTN: TAX DEPARTMENT  
HOUSTON TX 77020-6237  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

74-2091011

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

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

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, 2000 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	C	<input type="checkbox"/> Delete
NAME	STANLEY, ALBERT J	
STREET ADDRESS	601 JEFFERSON AVE	
CITY-ST-ZIP	HOUSTON TX 77002	
TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	EVANS, PETER M	
STREET ADDRESS	601 JEFFERSON AVE	
CITY-ST-ZIP	HOUSTON TX 77002	
TITLE	VT	<input checked="" type="checkbox"/> Delete
NAME	MCGRAW, DONALD R	
STREET ADDRESS	601 JEFFERSON AVENUE	
CITY-ST-ZIP	HOUSTON TX	
TITLE	AT	<input checked="" type="checkbox"/> Delete
NAME	WARE, WELDON	
STREET ADDRESS	601 JEFFERSON AVE	
CITY-ST-ZIP	HOUSTON TX 77002	
TITLE	VSD	<input type="checkbox"/> Delete
NAME	GILES, THOMAS E.	
STREET ADDRESS	601 JEFFERSON AVENUE	
CITY-ST-ZIP	HOUSTON TX	
TITLE		<input type="checkbox"/> Delete

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	PD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	LARRY D.J. POPE	
STREET ADDRESS	601 JEFFERSON AVE	
CITY-ST-ZIP	HOUSTON, TX 77002	
TITLE	VT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Jerry H. Blurton	
STREET ADDRESS	4100 Clinton Drive	
CITY-ST-ZIP	Houston, TX 77020	
TITLE	AT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	M. Steven Bander	
STREET ADDRESS	4100 Clinton Drive	
CITY-ST-ZIP	Houston, TX 77020	
TITLE	VP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	VPD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	V.A. Welch	
STREET ADDRESS	4100 Clinton Drive	
CITY-ST-ZIP	Houston, TX 77020	

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)