

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 854432

1. Entity Name

LUBBOCK CORPORATION

**FILED**  
**May 24, 2000 8:00 am**  
**Secretary of State**

05-24-2000 90093 016 \*\*\*150.00

Principal Place of Business

P.O. Box 1379  
TULSA, OK 74101-1379  
US

Mailing Address

P.O. Box 1379  
TULSA, OK 74101-1379  
US

2. Principal Place of Business

16400 GULF BLVD.  
Suite, Apt. #, etc.  
UNIT #507

3. Mailing Address

P.O. Box 8337

Suite, Apt. #, etc.

City & State

REDINGTON BEACH, FL

City & State

ST PETERSBURG, FL

Zip

33708

Country

US

Zip

33738

Country

US

4. FEI Number

75-1169471

Applied For

Not Applicable

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

MOORE, TUCKER  
16400 GULF BLVD. STE. 507  
REDINGTON BEACH FL 33708

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's signature required when re-statuting)

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

|                |                           |                                 |
|----------------|---------------------------|---------------------------------|
| TITLE          | PST                       | <input type="checkbox"/> Delete |
| NAME           | MOORE, C T                |                                 |
| STREET ADDRESS | 16400 GULF BLVD. STE. 507 |                                 |
| CITY-STATE-ZIP | REDINGTON BEACH FL 33708  |                                 |
| TITLE          | VD                        | <input type="checkbox"/> Delete |
| NAME           | CARTWRIGHT, MARY K.       |                                 |
| STREET ADDRESS | 5309 E PALOMINO RD        |                                 |
| CITY-STATE-ZIP | PHOENIX AZ 85018          |                                 |
| TITLE          | VD                        | <input type="checkbox"/> Delete |
| NAME           | MOORE, MELISSA A          |                                 |
| STREET ADDRESS | 16400 GULF BLVD. STE. 507 |                                 |
| CITY-STATE-ZIP | REDINGTON BEACH FL 33708  |                                 |
| TITLE          | V                         | <input type="checkbox"/> Delete |
| NAME           | MOHR, B A A               |                                 |
| STREET ADDRESS | 16400 GULF BEACH STE. 507 |                                 |
| CITY-STATE-ZIP | REDINGTON BEACH FL 33708  |                                 |
| TITLE          |                           | <input type="checkbox"/> Delete |
| NAME           |                           |                                 |
| STREET ADDRESS |                           |                                 |
| CITY-STATE-ZIP |                           |                                 |
| TITLE          |                           | <input type="checkbox"/> Delete |
| NAME           |                           |                                 |
| STREET ADDRESS |                           |                                 |
| CITY-STATE-ZIP |                           |                                 |

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

|                |   |
|----------------|---|
| TITLE          | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME           |   |
| STREET ADDRESS |   |
| CITY-STATE-ZIP |   |
| TITLE          | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME           |   |
| STREET ADDRESS |   |
| CITY-STATE-ZIP |   |
| TITLE          | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME           |   |
| STREET ADDRESS |   |
| CITY-STATE-ZIP |   |
| TITLE          | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME           |   |
| STREET ADDRESS |   |
| CITY-STATE-ZIP |   |
| TITLE          | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME           |   |
| STREET ADDRESS |   |
| CITY-STATE-ZIP |   |

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:

C.T. Moore President

4/22/00

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

CR25024 (9/99)

#854432  
A0065062

**EMMONS, HARTOG, & SWARTHOUT, P. C.**

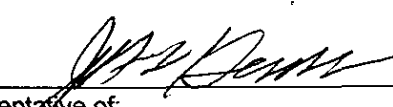
A PROFESSIONAL CORPORATION  
*Certified Public Accountants*

**LUBBOCK CORPORATION**  
FEIN: 75-1169471

A STATEMENT ATTACHED TO AND MADE A PART OF  
FORM CR2E034-UNIFORM BUSINESS REPORT

The foregoing was prepared by the undersigned or under his direction. The information contained therein was obtained from the taxpayer's records and other sources considered to be reliable, and are believed to be true and correct, although the preparer does not know such facts of his own knowledge.

Date: 4-26-00

  
Representative of:  
Emmons, Hartog & Swarthout, P.C.  
4111 South Darlington Avenue, Suite 400  
Tulsa, Oklahoma 74135-6319  
FEIN: 73-1432751  
Social Security Number: 067-44-2193