

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 17, 2000 8:00 am
Secretary of State

05-17-2000 90950 017 ***150.00

DOCUMENT #

1. Entity Name

856741
 Blackmon Mooring Stearns & Catastrophe, Inc.

Principal Place of Business

Mailing Address

303 Arthur St.
 Fort Worth, Tx 76107

Same

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

75-1738902

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

CT 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	President	<input type="checkbox"/> Delete
NAME	Lloyd E. Swiggen	
STREET ADDRESS	303 Arthur St	
CITY-ST-ZIP	Ft Worth, Tx 76107	
TITLE	Sec/Treasurer	<input type="checkbox"/> Delete
NAME	W.G. Blackmon III	
STREET ADDRESS	803 Arthur St	
CITY-ST-ZIP	Ft Worth, Tx 76107	
TITLE	Controller	<input type="checkbox"/> Delete
NAME	Cindy Cooper	
STREET ADDRESS	303 Arthur St	
CITY-ST-ZIP	Ft Worth, Tx 76107	
TITLE	Director	<input type="checkbox"/> Delete
NAME	Greg A. Blackmon	
STREET ADDRESS	303 Arthur St	
CITY-ST-ZIP	Ft Worth, Tx 76107	
TITLE	Director	<input type="checkbox"/> Delete
NAME	Kirk A. Blackmon	
STREET ADDRESS	303 Arthur St	
CITY-ST-ZIP	Ft Worth, Tx 76107	
TITLE	Director	<input type="checkbox"/> Delete
NAME	Scott Mooring III	
STREET ADDRESS	303 Arthur St	
CITY-ST-ZIP	Ft Worth, Tx 76107	

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

Cindy Cooper, Controller

4/28/00

817-332-2770

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2000 19/00