

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 25, 2005 8:00 am
Secretary of State

01-25-2005 90061 001 ***300.00

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01062005 Chg-P CR2E034 (10/03)

4. FEI Number **94-1737938** Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

CHIEF FINANCIAL OFFICER
P O BOX 6200 (32314-6200)
200 E. GAINES ST
TALLAHASSEE, FL 32399-0000

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	ADEE, MARC J	
STREET ADDRESS	10777 WESTHEINER RD STE 5 SOUTH	
CITY-ST-ZIP	HOUSTON, TX 77042	
TITLE	TD	<input checked="" type="checkbox"/> Delete
NAME	EPPOLITO, LINDA	
STREET ADDRESS	10777 WESTHEINER RD STE 5 SOUTH	
CITY-ST-ZIP	HOUSTON, TX 77042	
TITLE	SD	<input type="checkbox"/> Delete
NAME	BENNETT, NICOLE	
STREET ADDRESS	10777 WESTHEINER RD STE 5 SOUTH	
CITY-ST-ZIP	HOUSTON, TX 77042	
TITLE	D	<input type="checkbox"/> Delete
NAME	GOLDBOLD, LOYD	
STREET ADDRESS	10777 WESTHEINER RD STE 5 SOUTH	
CITY-ST-ZIP	HOUSTON, TX 77042	
TITLE	AS	<input type="checkbox"/> Delete
NAME	MCCOLLUM, EILEEN	
STREET ADDRESS	10777 WESTHEINER RD STE 5 SOUTH	
CITY-ST-ZIP	HOUSTON, TX 77042	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	Treasurer	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Paul Mundy	
STREET ADDRESS	10777 Westheimer Rd. Ste. 5 South	
CITY-ST-ZIP	Houston, TX 77042	
TITLE	Director	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	Director, Vice President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	Secretary	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	Vice President, Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Sharlene Husky	
STREET ADDRESS	10777 Westheimer Rd Ste 5 South	
CITY-ST-ZIP	Houston, TX 77042	

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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #