

# 2002 UNIFORM BUSINESS REPORT (UBR)

10/2

DOCUMENT # **B97000000350**

1. Entity Name

**OM FUND I PARTNERS, L.P.**

FILED

02 APR 30 AM 1:49

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business

**300 CRESCENT COURT, SUITE 500  
DALLAS TX 75201**

Mailing Address

**300 CRESCENT COURT, SUITE 500  
DALLAS TX 75201**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

**DUE BY MAY 1, 2002**

4. FEI Number

**75-2643276**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE FL 32301-2525**

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

DATE

9. Capital Contributions  
as Shown on record.

**\$674,108.00**

10. Amount of Capital Contributions  
in FLORIDA to date.

**\$674,108**

11. **MAKE CHECK PAYABLE TO DEPT. OF STATE  
SEE REVERSE SIDE FOR FEE INFORMATION**

**A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.  
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.**

12. GENERAL PARTNER INFORMATION

13. ADDRESS CHANGES ONLY

DOCUMENT # **F97000003677**  
NAME **OM, INC.**  
STREET ADDRESS **300 CRESCENT COURT, SUITE 500**  
CITY-ST-ZIP **DALLAS TX 75201**

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

**500005610355--4**

**05/24/02--01051--018**

**\*\*\*\*526.25 \*\*\*\*526.25**

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

**FF \$526.25**

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

14. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE:

**Ron J. Hoyl, Vice President**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

**See signature 4-23-02 214720**  
**adendum attached hereto 7800**

Date

Daytime Phone #

CR2E003 (9/01)

292

FILED

Signature Addendum  
to  
2002 Uniform Business Report


02 APR 30 AM 1:49

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Dated: April 23, 2002

OM FUND I PARTNERS, L.P.,  
a Texas limited partnership

By: OM, Inc.,  
a Delaware corporation,  
its general partner

By:   
Name: Ron J. Hoyl,  
Title: Vice President