

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F00000000149

1. Entity Name

H. D. VEST TECHNOLOGY SERVICES, INC.

FILED
May 12, 2001 8:00 am
Secretary of State

05-12-2001 90030 020 ***150.00

Principal Place of Business

6333 NORTH STATE HIGHWAY 161
IRVING TX 75038

Mailing Address

6333 NORTH STATE HIGHWAY 161
IRVING TX 75038

00043331

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 75-2847559

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

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.

(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, 2001 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 CD ☐ Delete
NAME VEST, HRB D
STREET ADDRESS 6333 NORTH STATE HIGHWAY 161
CITY-ST-ZIP IRVING TX 75038

TITLE P ☐ Delete
NAME OCHS, ROGER
STREET ADDRESS 6333 NORTH STATE HIGHWAY 161
CITY-ST-ZIP IRVING TX 75038

TITLE VS ☒ Delete
NAME SOEFJE, SHANNON
STREET ADDRESS 6333 NORTH STATE HIGHWAY 161
CITY-ST-ZIP IRVING TX 75038

TITLE VCFO ☐ Delete
NAME SINCLAIR, TED
STREET ADDRESS 6333 NORTH STATE HIGHWAY 161
CITY-ST-ZIP IRVING TX 75038

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE SECRETARY ☐ Change ☒ Addition
NAME OCHS, ROGER
STREET ADDRESS 6333 NORTH STATE HWY 161
CITY-ST-ZIP IRVING, TX 75038

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ 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:

SINCLAIR, TED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SINCLAIR, TED
Date

4/23/01
Date

(972) 870-6000
Daytime Phone #

CR2E034 (10/00)