

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F00000000389

1. Entity Name

MNB FINANCIAL SERVICES, INC.

FILED

May 02, 2001 8:00 am  
Secretary of State

05-02-2001 90177 031 \*\*\*150.00

Principal Place of Business

4230 LBJ FREEWAY, SUITE 570  
DALLAS TX 75244

Mailing Address

4230 LBJ FREEWAY, SUITE 570  
DALLAS TX 75244

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number 75-2649024

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

IREDALE, DOUG  
501 E. OAK ST., SUITE F  
KISSIMMEE FL 34744

7. Name and Address of New Registered Agent

Name Micheal J. Coniglio

Street Address (P.O. Box Number is Not Acceptable)

971 E. Tennessee

City Tallahassee

FL

Zip Code 32308

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	PCST	<input checked="" type="checkbox"/> Delete
NAME	FREY, JAMES L	
STREET ADDRESS	4230 LBJ FREEWAY, SUITE 570	
CITY-ST-ZIP	DALLAS TX 75244	
TITLE	V	<input checked="" type="checkbox"/> Delete
NAME	THOMAS, DONALD W	
STREET ADDRESS	4230 LBJ FREEWAY, SUITE 570	
CITY-ST-ZIP	DALLAS TX 75244	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D/S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Anita G. Blankenship	
STREET ADDRESS	4230 LBJ Frwy Suite 570	
CITY-ST-ZIP	Dallas, TX 75244	
TITLE	P	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Billy B. Williams	
STREET ADDRESS	4230 LBJ Frwy Suite 570	
CITY-ST-ZIP	Dallas, TX 75244	
TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Cynthia A. Altizer	
STREET ADDRESS	4230 LBJ Frwy Suite 570	
CITY-ST-ZIP	Dallas, TX 75244	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Robert G. Rivera	
STREET ADDRESS	4230 LBJ Frwy Suite 570	
CITY-ST-ZIP	Dallas, TX 75244	
TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Nicola D. Blankenship	
STREET ADDRESS	4230 LBJ Frwy Suite 570	
CITY-ST-ZIP	Dallas, TX 75244	

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Anita G. Blankenship 01/16/01 972-458-6881

Date

Daytime Phone #

CR2E034 (10/00)

C0057520



DO NOT WRITE IN THIS SPACE