

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 09, 2002 8:00 am**  
**Secretary of State**

05-09-2002 90028 007 \*\*\*150.00

**DOCUMENT # F00000003387**

**1. Entity Name**  
**BLUE CORAL, INC.**

**Principal Place of Business**

**700 MILAM  
 HOUSTON TX 77002**

**Mailing Address**

**700 MILAM  
 HOUSTON TX 77002**

**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**

**34-1263041**

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**

**C T CORPORATION SYSTEM  
 1230 SOUTH PINE ISLAND ROAD  
 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, 2002 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** **DV** ☐ Delete  
**NAME** **KELLAGHER, THOMAS P**  
**STREET ADDRESS** **700 MILAM**  
**CITY-ST-ZIP** **HOUSTON TX 77002**

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

**TITLE** **D** ☐ Delete  
**NAME** **POSTL, JAMES J**  
**STREET ADDRESS** **700 MILAM**  
**CITY-ST-ZIP** **HOUSTON TX 77002**

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

**TITLE** **V** ☒ Delete  
**NAME** **SHADDIX, JAMES W**  
**STREET ADDRESS** **700 MILAM**  
**CITY-ST-ZIP** **HOUSTON TX 77002**

**TITLE** **V** ☐ Change ☒ Addition  
**NAME** **John M. Freeman**  
**STREET ADDRESS** **700 Milam**  
**CITY-ST-ZIP** **Houston, TX 77002**

**TITLE** **P** ☒ Delete  
**NAME** **SOKOL, BRIAN V**  
**STREET ADDRESS** **700 MILAM**  
**CITY-ST-ZIP** **HOUSTON TX 77002**

**TITLE** **P D** ☐ Change ☒ Addition  
**NAME** **Douglas S. Boyle**  
**STREET ADDRESS** **700 Milam**  
**CITY-ST-ZIP** **Houston, TX 77002**

**TITLE** **AS** ☐ Delete  
**NAME** **KOONTZ, SUSAN DIANE**  
**STREET ADDRESS** **700 MILAM**  
**CITY-ST-ZIP** **HOUSTON TX 77002**

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

**TITLE** **CD** ☐ Delete  
**NAME** **WRABE, RUDOLPH R**  
**STREET ADDRESS** **700 MILAM**  
**CITY-ST-ZIP** **HOUSTON TX 77002**

**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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
**Susan Diane Koontz, Assistant Secretary**

**4/17/02**

Date

**713/546-8601**

Daytime Phone #

CR2E034 (9/01)

Attachment  
Doc. # 850844  
FO0000003387

**Blue Coral, Inc.**  
700 Milam, P. O. Box 2967  
Houston, Texas 77252-2967

**Officers and Directors as of 1/25/02**

**Directors**

Douglas S. Boyle  
Thomas P. Kellagher  
James J. Postl

**Officers**

Douglas S. Boyle  
Linda F. Condit  
Robert A. Falivene  
John M. Freeman  
Thomas P. Kellagher  
Paul B. Siegel  
Laurie K. Stewart  
Michael J. Maratea  
Kenneth L. Krch  
Katherine W. McDonald  
John E. Roueche, III  
Michael P. Schieffer  
Mae Dell Carpenter  
Susan Diane Koontz  
Ruth E. Salek

President  
Vice President and Secretary  
Vice President  
Vice President  
Vice President  
Vice President  
Vice President and Treasurer  
Controller  
Assistant Treasurer  
Assistant Treasurer  
Assistant Treasurer  
Assistant Treasurer  
Assistant Secretary  
Assistant Secretary  
Assistant Secretary

**NOTE:** The address for each officer and director is listed above. All terms expire upon the election of successors.