## **2004 FOR PROFIT CORPORATION**

## **ANNUAL REPORT** DOCUMENT # F01000001910 SECURITY BROADBAND GP, INC.



Principal Place of Business

Mailing Address

600 CONGRESS AVE., SUITE 200 **AUSTIN, TX 78701** 

600 CONGRESS AVE., SUITE 200 AUSTIN, TX 78701

## **FILED** May 05, 2004 8:00 am Secretary of State

05-05-2004 90245 009 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

Applied For 4. FEI Number 74-2982832 Not Applicable

5. Certificate of Status Desired

01072004

\$8.75 Additional Fee Required

CR2E034 (10/03)

6. Name and Address of Current Registered Agent

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

## DO NOT WRITE IN THIS SPACE

No Chg-P

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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE				
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00  9. Election Campaign Finar Trust Fund Contribution.		\$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PS BASS, HARRIS 600 CONGRESS AVE., SUITE 200 AUSTIN, TX 78701			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD GLASGOW, WILLIAM 600 CONGRESS AVE., SUITE 200 AUSTIN, TX 78701			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO	NOT WRITE
NAME STREET ADDRESS CITY+ST-ZIP			IN '	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				•
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 given like empowered.				

tarris Bass

SIGNATURE:

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR