

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 24, 2002 8:00 am
Secretary of State

01-24-2002 90367 037 ***150.00

DOCUMENT # F01000002101

1. Entity Name
LONGVIEW INSPECTION, INC.

Principal Place of Business
16055 SPACE CENTER BLVD., SUITE 650
HOUSTON TX 77062

Mailing Address
16055 SPACE CENTER BLVD., SUITE 650
HOUSTON TX 77062

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
75-2332601

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

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

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 ☐ **\$5.00 May Be Added to Fees**
 Trust Fund Contribution.

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **Chairman / Director** ☐ Delete
NAME **TREAT, JAMES**
STREET ADDRESS **16055 SPACE CENTER BLVD., SUITE 650**
CITY-ST-ZIP **HOUSTON TX 77062**

TITLE **President** ☐ Change ☒ Addition
NAME **Mike Creech**
STREET ADDRESS **16055 Space Center Blvd., Ste. 650**
CITY-ST-ZIP **Houston, TX 77062**

TITLE **Vice-President / Director** ☐ Delete
NAME **SCANNELL, PETER**
STREET ADDRESS **43 ARCH STREET**
CITY-ST-ZIP **GREENWICH CT 06830**

TITLE **Secretary** ☐ Change ☒ Addition
NAME **Tom Williams**
STREET ADDRESS **16055 Space Center Blvd., Ste. 650**
CITY-ST-ZIP **Houston, TX 77062**

TITLE **V** ☒ Delete
NAME **COMSTOCK, THOMAS**
STREET ADDRESS **16055 SPACE CENTER BLVD., SUITE 650**
CITY-ST-ZIP **HOUSTON TX 77062**

TITLE **Assistant Secretary** ☐ Change ☒ Addition
NAME **Sherry Woodruff**
STREET ADDRESS **16055 Space Center Blvd., Ste. 650**
CITY-ST-ZIP **Houston, TX 77062**

TITLE **VS** ☒ Delete
NAME **TUMEY, R S**
STREET ADDRESS **16055 SPACE CENTER BLVD., SUITE 650**
CITY-ST-ZIP **HOUSTON TX 77062**

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

TITLE **Treasurer** ☐ Delete
NAME **FINDLAY, HAL**
STREET ADDRESS **43 ARCH STREET**
CITY-ST-ZIP **GREENWICH CT 06830**

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

TITLE **D** ☐ Delete
NAME **STANKIEVECH, KENNETH**
STREET ADDRESS **#6, 1313 - 44TH AVE. N.E.**
CITY-ST-ZIP **CALGARY, AB, CANADA T2E 6L5**

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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

281-853-2800

CR2E034 (9/01)