

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 31, 2003 8:00 am
Secretary of State

01-31-2003 90114 023 ***158.75

DOCUMENT # F02000004659

1. Entity Name

DEFAULT PUBLICATIONS, INC.



Principal Place of Business
3200 BRAODWAY BLVD., SUITE 410
GARLAND TX 75043

Mailing Address
3200 BRAODWAY BLVD., SUITE 410
GARLAND TX 75043

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 72-1491014

Applied For
Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional Fee Required

☒ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BECKER, ANGELA E
5445 SO SEMORAN BLVD. #235
ORLANDO FL 32822

Name
Becker, Angela E.
Street Address (P.O. Box Number Not Acceptable)
5449 S. Semoran Blvd. #235
City Orlando FL Zip Code 32822

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 Angela E. Becker
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

1/24/03

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE CPT ☐ Delete
NAME CAMPBELL, ROBIN P.
STREET ADDRESS 278 DONOVAN COURT
CITY-ST-ZIP BATON ROUGE LA 70815

TITLE V/DIT ☒ Change ☐ Addition
NAME Campbell, Robin P.
STREET ADDRESS 278 Donovan Court
CITY-ST-ZIP Baton Rouge, LA 70815

TITLE VCS ☐ Delete
NAME DRAPER, VICTOR G.
STREET ADDRESS 6017 COVINGTON DR.
CITY-ST-ZIP ROWLETT TX 75089

TITLE P/D/S ☒ Change ☐ Addition
NAME Draper, Victor G.
STREET ADDRESS 6017 Covington Dr.
CITY-ST-ZIP Rowlett, TX 75089

TITLE D ☐ Delete
NAME HOSCH, ROBERT H JR.
STREET ADDRESS 4849 LORRAINE WAY
CITY-ST-ZIP ORLANDO FL 32812

TITLE D ☒ Change ☐ Addition
NAME Hosch, Robert H Jr.
STREET ADDRESS 3185 S. Conway Rd., Suite E
CITY-ST-ZIP Orlando, FL 32812

TITLE D ☐ Delete
NAME BUTLER, C. VICTOR
STREET ADDRESS 6065 LEXINGTON PARK
CITY-ST-ZIP ORLANDO FL 32819

TITLE D ☒ Change ☐ Addition
NAME Butler, C. Victor
STREET ADDRESS 3185 S. Conway Rd., Suite E
CITY-ST-ZIP Orlando, FL 32812

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE V ☐ Change ☒ Addition
NAME Eric Donowho
STREET ADDRESS 722 Brighton Lane
CITY-ST-ZIP Garland, TX 75043

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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 other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Victor Draper

1/21/03

Date

972-926-5407

Daytime Phone #

CR2E034 (10/02)