

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 16, 2007 8:00 am
Secretary of State

01-16-2007 90257 035 ***150.00

DOCUMENT # F05000000068

1. Entity Name
PROCLAIM AMERICA, INC.



Principal Place of Business
9800 CENTRE PARKWAY, SUITE 650
HOUSTON, TX 77036 US

Mailing Address
1535 N DALE MABRY HIGHWAY
SUITE 202
LUTZ, FL 33548 US

50000040



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01092007

Chg-P

CR2E034 (12/06)

4. FEI Number
76-0512521

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

CALIMANO, KARIN
1535 N DALE MABRY HIGHWAY
SUITE 202
LUTZ, FL 33548

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. 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, 2007 Fee will be \$550.00

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
NAME
STREET ADDRESS
CITY-ST-ZIP
P
COSTANTINO, JOSEPH J
3002 GOLDEN HILLS LANE
MISSOURI CITY, TX 77459 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
EVP
D'heron, Joseph
3310 Robinson Road
Missouri City, TX 77459 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V
FERDENZI, CARL
31 FOX HOLLOW RIDINGS RD
NORTHPORT, NY 11768 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
DAVIS, DENNIS
1910 CRIMSON BERRY DR
KINGWOOD, TX 77345 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CTD
BRENT, RANDALL P
3703 COLONY WOODS DR
SUGAR LAND, TX 77479 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VCD
MOSIER, RHONDA
14718 CHARLMONT
HOUSTON, TX 77083 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
EVP
D'heron, Joseph
3310 Robinson Road
Missouri City, TX 77459 ☐ Delete

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/9/07

713 771 3500