

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 27, 2007 08:00 A
Secretary of State

DOCUMENT # F05000005018

1. Entity Name
**ELECTRONIC PAVEMENT & INFRASTRUCTURE
CHARTING, INC.**



Principal Place of Business
**13900 HUMBLE RD
TOMBALL, TX 77377**

Mailing Address
**P.O. BOX 168
TOMBALL, TX 77377**



04022007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
87-0742295

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

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**

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
BROWN, RANDALL W
P.O. BOX 168
TOMBALL, TX 77377**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**CVD
BARON, BRENT J
5919 BERMUDA DUNES
HOUSTON, TX 77069**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
SEVERANCE, GODON
6619 CHANCELLOR ST
SPRING, TX 77379**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T
BOCK, ED S
13900 HUMBLE RD
TOMBALL, TX 77377**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VCD
LYTTON, ROBERT L
2108 BARAK LANE
BRYAN, TX 77802**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VCD
POSTON, JIM A
747 LONGWOOD ST
HOUSTON, TX 77079**

U000000736367
05/10/07-80073-016 150.00

**DO NOT WRITE
IN THIS SPACE**

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

Ed. S. Bock 4-2-7 281-351-7800

Date

Daytime Phone #