## **2001 UNIFORM BUSINESS REPORT (UBR)**

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

## FILED Apr 26, 2001 8:00 am Secretary of State DOCUMENT # **F56598** 1. Entity Name PRG FLORIDA IV, INC. 4-26-2001 90090 003 \*\*\*150.00 Principal Place of Business Mailing Address 14800 LANDMARK 14800 LANDMARK STE 500 STE 500 DALLAS TX 75240 DALLAS TX 75240 Principal Place of Business O Jackson Walker Att: Pam Ol Lain-St. 3. Mailing Address c/o Jackson Walker Att: Pam 901 Main St Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 6000 6000 City & State City & State 4. FEI Number Applied For 59-2145293 Dallas, Texas Dallas, Texas Not Applicable Zip **75202** Country \$8.75 Additional .75202 5. Certificate of Status Desired U.S.A. U.S.A. Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name NRAI SERVICES, INC. Street Address (P.O. Box Number is Not Acceptable) **526 EAST PARK AVENUE** TALLAHASSEE FL 32301 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) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. ☐ Addition TITLE ☐ Delete Change President/Sole Director YEARY, MICHAEL NAME STREET ADDRESS 14800 LANDMARK STE 500 STREET ADDRESS 5005 Riverway Dr., Ste 400 CITY-ST-ZIP CITY-ST-ZIP DALLAS TX 75240 Houston, Texas 77056 TITLE ☐ Delete TITLE Change ☐ Addition NAME NICOLAGU, KAREN NAME STREET ADDRESS 5005 RIVERWAY DR STE 400 STREET ADDRESS CITY-ST-ZIP **HOUSTON TX 77056** CITY-ST-ZIP TITLE TITLE X Delete NAME EDENBURN, LANE NAME STREET ADDRESS 14800 LANDMARK STE 500 STREET ADDRESS CITY-ST-ZIP DALLAS TX 75240 CITY-ST-ZIP ☐ Delete TITLE ☐ Change ■ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Detete TITLE ☐ Change ☐ Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY~ST-7IP 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

Michael Yeary

4/9/01

214-953-5647

Daytime Phone #