

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

04 JAN 29 AM 8:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F93000001072

1. Entity Name
CARMIL CAPITAL CORPORATION



Principal Place of Business
600 EAST LAS COLINAS BLVD., SUITE 1800
IRVING, TX 75039

Mailing Address
600 EAST LAS COLINAS BLVD., SUITE 1800
IRVING, TX 75039

DO NOT WRITE IN THIS SPACE



01122004 No Chg-P CR2E034 (10/03)

4. FEI Number
75-2290047

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

CORPORATION INFORMATION SERVICES, INC.
1201 HAYS STREET
TALLAHASSEE, FL 32301

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, 2004 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
DP
MILLER, J.F. III
600 EAST LAS COLINAS BLVD., SUITE 1800
IRVING, TX 75039

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
EVP
PAGE, ROBERT
2020 SCHUMARD OAK LN.
IRVING, TX

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
EVST
SCHUBERT, FRANK B JR.
600 EAST LAS COLINAS BLVD., SUITE 1800
IRVING, TX 75039

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SVP
HARRIS, CHRISTOPHER C
4320 EDMONDSON AVE
DALLAS, TX

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
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 officers and directors.

SIGNATURE:

Clay A. Parker
Executive Vice President and Senior Operational Partner
Financial Services

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #