

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # F93000001285 (6)

1. Corporation Name

SYNTEK ASSET MANAGEMENT, INC.



Principal Place of Business

Mailing Address

10670 NORTH CENTRAL EXPRESSWAY, SUITE 600  
DALLAS TX 75231

10670 NORTH CENTRAL EXPRESSWAY, SUITE 600  
DALLAS TX 75231

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

03/05/1993

3a. Date of Last Report

07/19/1995

4. FEI Number

75-2300452

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐ \$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☒ Yes ☐ No

10. Name and Address of New Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and the corporation

Block 13. Registered Agent Signature required when new agent

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP

PD

CASHWELL, OSCAR W.

10670 N. CENTRAL EXPY #600  
DALLAS TX

☒ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

V

SCHRAUFF, HAMILTON P

10670 N. CENTRAL EXPWY., SUITE 600  
DALLAS TX 75231

☒ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

VS

WALDMAN, ROBERT A

10670 N. CENTRAL EXPWY., SUITE 600  
DALLAS TX 75231

☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

VT

POTERA, DREW D

10670 N. CENTRAL EXPWY., SUITE 600  
DALLAS TX 75231

☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

CD

PHILLIPS, GENE E

10670 N. CENTRAL EXPWY., SUITE 600  
DALLAS TX 75231

☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

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TITLE NAME STREET ADDRESS CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP

P/D

PAULSON, RANDALL M.

10670 N. CENTRAL EXPY., SUITE 600  
DALLAS TX 75231

☒ Change ☐ Addition

2.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP

V

HOLLAND, THOMAS A.

10670 N. CENTRAL EXPY., SUITE 600  
DALLAS TX 75231

☒ Change ☐ Addition

3.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP

☐ Change ☐ Addition

3.2 TITLE NAME STREET ADDRESS CITY-ST-ZIP

☐ Change ☐ Addition

3.3 TITLE NAME STREET ADDRESS CITY-ST-ZIP

☐ Change ☐ Addition

3.4 TITLE NAME STREET ADDRESS CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP

☐ Change ☐ Addition

4.2 TITLE NAME STREET ADDRESS CITY-ST-ZIP

☐ Change ☐ Addition

4.3 TITLE NAME STREET ADDRESS CITY-ST-ZIP

☐ Change ☐ Addition

4.4 TITLE NAME STREET ADDRESS CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP

☐ Change ☐ Addition

5.2 TITLE NAME STREET ADDRESS CITY-ST-ZIP

☐ Change ☐ Addition

5.3 TITLE NAME STREET ADDRESS CITY-ST-ZIP

☐ Change ☐ Addition

5.4 TITLE NAME STREET ADDRESS CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP

☐ Change ☐ Addition

6.2 TITLE NAME STREET ADDRESS CITY-ST-ZIP

☐ Change ☐ Addition

6.3 TITLE NAME STREET ADDRESS CITY-ST-ZIP

☐ Change ☐ Addition

6.4 TITLE NAME STREET ADDRESS CITY-ST-ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-4-96

Date

214-692-4700

Daytime Phone #

CR2E034 (12/95)