FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR -6 AM 9:31

DOCUMENT # **F93000001789 (7)**

1. Corporation Name
SUPPORT TERMINAL SERVICES, INC.

Principal Place of Business	Mailing Address
2400 LAKESIDE BLVD., SUITE 600 RICHARDSON TX 75082	2400 LAKESIDE BLVD., SUITE 600 RICHARDSON TX 75082

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 04/13/1993
3a. Date of Last Report: 08/10/1994

	Principal Place of Business	Mailing Address
2. / 2a.	21 2435 North Central Exp	26 2435 N. Central Expressway
Suite, Apt. #, etc.	22 SUITE 700	27 SUITE 700
City & State	23 Richardson, Texas	28 Richardson, Texas
Zip / Country	24 75080 / 25 Richardson	29 75080 / 30 Richardson

4. FEI Number: 75-2459340 ☐ Applied For ☐ Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

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

9. Name and Address of Current Registered Agent

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

10. Name and Address of New Registered Agent

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 _____ (DATE)
Signature, Typed or printed name of registered agent and title if officer (P.O. Registered Agent signature required when necessary)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	11 TITLE	PD ☑ Change ☐ Addition
NAME	DOHERTY, EDWARD D	12 NAME	DOHERTY, EDWARD D
STREET ADDRESS	2400 LAKESIDE BLVD., SUITE 600	13 STREET ADDRESS	2435 NORTH CENTRAL EXPRESSWAY, SUITE 700
CITY-ST-ZIP	RICHARDSON TX 75082	14 CITY ST ZIP	RICHARDSON, TX 75080
TITLE	VD	21 TITLE	VD ☑ Change ☐ Addition
NAME	EASUM, DOUGLAS M	22 NAME	EASUM, DOUGLAS M.
STREET ADDRESS	2400 LAKESIDE BLVD., SUITE 600	23 STREET ADDRESS	2435 North Central Expressway, Suite 700
CITY ST ZIP	RICHARDSON TX 75082	24 CITY ST ZIP	Richardson, TX 75080
TITLE	VS	31 TITLE	☑ Change ☐ Addition
NAME	HOFFNER, STEPHEN M	32 NAME	N/A
STREET ADDRESS	2400 LAKESIDE BLVD., SUITE 600	33 STREET ADDRESS	
CITY ST ZIP	RICHARDSON TX 75082	34 CITY ST ZIP	
TITLE	T	41 TITLE	TS ☑ Change ☐ Addition
NAME	WADSWORTH, HOWARD C	42 NAME	WADSWORTH, HOWARD C.
STREET ADDRESS	2400 LAKESIDE BLVD., SUITE 600	43 STREET ADDRESS	2435 North Central Expressway, Suite 700
CITY ST ZIP	RICHARDSON TX 75082	44 CITY ST ZIP	Richardson, TX 75080
TITLE	DAS	51 TITLE	DAS ☑ Change ☐ Addition
NAME	JONES, JOE M	52 NAME	JONES, JOE M.
STREET ADDRESS	2400 LAKESIDE BLVD., SUITE 600	53 STREET ADDRESS	2435 North Central Expressway, Suite 700
CITY-ST-ZIP	RICHARDSON TX 75082	54 CITY ST ZIP	Richardson, TX 75080
TITLE	P	61 TITLE	☐ Change ☐ Addition
NAME	JOHNSON, F.T.	62 NAME	
STREET ADDRESS	17304 PRESTON ROAD, SUITE 1000	63 STREET ADDRESS	
CITY ST ZIP	DALLAS TX 75252	64 CITY ST ZIP	

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)(i), 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: Ed Doherty 3/28/95 (214) 699-4000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone Number

0478100 FP