

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Feb 24, 1999 8:00 am  
Secretary of State

02-24-1999 90035 030 \*\*\*150.00

DOCUMENT # F93000001789

1. Corporation Name

SUPPORT TERMINAL SERVICES, INC.



Principal Place of Business

2435 N CENTRAL EXP  
STE 700  
RICHARDSON TX 75080  
US

Mailing Address

P O BOX 650283  
ATTN TAX DEPT.  
DALLAS TX 75265-283  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/13/1993

4. FEI Number

75-2459340

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 owes the current year Intangible  
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

21 None at present

2a. Mailing Address

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

25

29

30

9. Name and Address of Current Registered Agent

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS ☐ DELETE

TITLE C  
NAME DOHERTY, EDWARD D  
STREET ADDRESS 2435 N CENTRAL EXPY #700  
CITY-ST-ZIP RICHARDSON TX

TITLE TS ☐ DELETE

NAME WADSWORTH, HOWARD C  
STREET ADDRESS 2435 N CENTRAL EXPY #700  
CITY-ST-ZIP RICHARDSON TX

TITLE DAS ☒ DELETE

NAME JONES, JOE M  
STREET ADDRESS 2435 N CENTRAL EXPY #700  
CITY-ST-ZIP RICHARDSON TX

TITLE P ☐ DELETE

NAME JOHNSON, F.T.  
STREET ADDRESS 17304 PRESTON ROAD, SUITE 1000  
CITY-ST-ZIP DALLAS TX 75252

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ☐ Change ☐ Addition

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE Phil Lewis  
5.2 NAME Vice President  
5.3 STREET ADDRESS 17304 Preston Rd #1000  
5.4 CITY-ST-ZIP Dallas, TX 75252

6.1 TITLE Vice President  
6.2 NAME Alan Barclay  
6.3 STREET ADDRESS 17304 Preston Rd #1000  
6.4 CITY-ST-ZIP Dallas, TX 75252

14. 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 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, with all other like empowered.

SIGNATURE:

Phil Lewis PHIL LEWIS

Date

1/5/99

Daytime Phone #

972-931-8065

CR2E034 (1/198)

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