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

PROFIT CORPORATION ANNUAL REPORT

1998

FLORIDA DEPARTMENT OF STATE

## Sandra B<sub>L</sub> Morth<u>a</u>m

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9300003850 (5)

CRIMSON CORP.

FILED Apr 21 1998 8:00am Secretary of State

Principal Place of Business Mailing Address 200 WESTLAKE PARK BOULEVARD. SUITE 100 200 WESTLAKE PARK BOULEVARD, SUITE 100 HOUSTON TX 77078 HOUSTON TX 77079 DO NOT WRITE IN THIS SPACE US 3. Date Incorporated or Qualified 08/24/1993 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 76-0422335 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 100 22 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing П 23 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes Yes ☐ No 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name DOWNEY, STUART D 5900 N. ANDREWS AVENUE, SUITE 225 Street Address (P.O. Box Number is Not Acceptable) FORT LAUDERDALE FL 33309 83 84 City Zip Code 1f. 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 it applicable (NOTE Registered Agent signature required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 CR2E034 (10/97 12. OFFICERS AND DIRECTORS 13. 1. WINCH! DELETE Change Addition 1 1 TITLE TITLE PATRINELY, C. DEAN NAME 1.2 NAME SVITE 700 200 WESTLAKE PARK BOULEVARD, SUITE 100 STREET ADDRESS 1.3 STREET ADDRESS **HOUSTON TX 77079** 1.4 CITY-ST-ZIP CITY - ST - ZIP DELETE ☐ Addition 2.1 TITLE TITLE NICHOLLS, MICHAEL E NAME 2.2 NAME 200 WESTLAKE PARK BOULEVARD, SUITE 100 2 3 STREET ADDRESS STREET ADORESS **HOUSTON TX 77079** CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE 3.1 TITLE Change Addition TITLE NAME 3 2 NAME 3 3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 34. CITY-ST-ZIP DELETE Change \_\_\_ Addition 4.1 TITLE TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE 5.1 TITLE Change Addition TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADORESS CITY-ST-ZIP 5.4 CITY-ST-ZIP Change Addition DELETE 6.1 TITLE TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP 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 supplied with this filling does not qualify the exhibition stated in Section 113.07(5)(f), Florida Statutes. Filling coefficients indicated on this annual report or suppliemental 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 empowerer to execute this eport as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or one as attachments that an address.

SIGNATURE:

3-18-98