

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F94000003276

1. Entity Name

AMERICAN DATASOURCE, INC.

FILED
May 26, 2000 8:00 am
Secretary of State

05-26-2000 90113 024 ***150.00

Principal Place of Business

Mailing Address

2010 NORTH LOOP WEST
SUITE #210
HOUSTON TX 77018-8110
US

1929 ALLEN PARKWAY
9TH FLOOR
HOUSTON TX 77019-2507

2. Principal Place of Business

3. Mailing Address

2010 N. Loop W., Ste. 210

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State
Houston, TX

4. FEI Number

23-2611362

Applied For

Not Applicable

Zip

Country

Zip

Country

77018

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND
PLANTATION FL 33324

Name

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

City

FL

Zip Code

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.

SIGNATURE

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	COO	<input type="checkbox"/> Delete
NAME	ALES, THOMAS W.	
STREET ADDRESS	1929 ALLEN PARKWAY	
CITY-ST-ZIP	HOUSTON TX 77019	
TITLE	P	<input checked="" type="checkbox"/> Delete
NAME	DAVIS, BRIAN E	
STREET ADDRESS	1929 ALLEN PARKWAY	
CITY-ST-ZIP	HOUSTON TX 77019	
TITLE	SVP	<input checked="" type="checkbox"/> Delete
NAME	MCGUIRE, MATTHEW F	
STREET ADDRESS	1929 ALLEN PARKWAY	
CITY-ST-ZIP	HOUSTON TX 77019	
TITLE	VP	<input checked="" type="checkbox"/> Delete
NAME	COUCH, J. CHRISTOPHER	
STREET ADDRESS	1929 ALLEN PARKWAY	
CITY-ST-ZIP	HOUSTON TX 77019	
TITLE	D.	<input checked="" type="checkbox"/> Delete
NAME	CAUTHEN, GREGORY L	
STREET ADDRESS	1929 ALLEN PARKWAY	
CITY-ST-ZIP	HOUSTON TX 77019	
TITLE	T	<input checked="" type="checkbox"/> Delete
NAME	DAVIS, BRIAN E	
STREET ADDRESS	1929 ALLEN PARKWAY	
CITY-ST-ZIP	HOUSTON TX 77019	

TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	2010 N. Loop W., Ste. 210	
CITY-ST-ZIP	Houston, TX 77018	
TITLE	President, Director	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	James N. Lucas, Sr.	
STREET ADDRESS	2010 N. Loop W., Ste. 210	
CITY-ST-ZIP	Houston, TX 77018	
TITLE	Secretary, Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	James N. Lucas, Jr.	
STREET ADDRESS	2010 N. Loop W., Ste. 210	
CITY-ST-ZIP	Houston, TX 77018	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Thomas W. Ales

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/28/2000 (713) 681-8195

CR2E034 (9/99)