

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F94000005739

1. Entity Name

FIRST SIERRA FINANCIAL, INC.

**FILED**  
**May 09, 2000 8:00 am**  
**Secretary of State**

05-09-2000 90023 041 \*\*\*150.00

Principal Place of Business Mailing Address  
TEXAS COMMERCE TOWER, 70TH FLOOR TEXAS COMMERCE TOWER, 70TH FLOOR  
600 TRAVIS STREET 600 TRAVIS STREET  
HOUSTON TX 77002 HOUSTON TX 77002-3002

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

4. FEI Number 76-0438432 Applied For  
Not Applicable

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

C-T CORPORATION SYSTEM  
1200 S PINE ISLAND RD  
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 PD ☐ Delete  
NAME DEPPING, THOMAS J  
STREET ADDRESS 1811 SEVEN MAPLES  
CITY-ST-ZIP KINGWOOD TX 77345

TITLE P/C ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 5602 RAPID BROOK  
CITY-ST-ZIP KINGWOOD, TX. 77345

TITLE D ☐ Delete  
NAME SOLOMON, DAVID L  
STREET ADDRESS 5847 SAN FELIPE  
CITY-ST-ZIP HOUSTON TX 77057

TITLE 109 NORTH POST OAK LANE ☒ Change ☐ Addition  
NAME SUITE 200  
STREET ADDRESS HOUSTON, TX. 77024  
CITY-ST-ZIP

TITLE D ☐ Delete  
NAME SHINDELDECKER, DAVID C  
STREET ADDRESS 1716 MANGUM & WEST 18TH  
CITY-ST-ZIP HOUSTON TX 77092

TITLE 109 NORTH POST OAK LANE ☒ Change ☐ Addition  
NAME SUITE 200  
STREET ADDRESS HOUSTON, TX. 77024  
CITY-ST-ZIP

TITLE VS ☐ Delete  
NAME HO, SANDY  
STREET ADDRESS 245 MERRIE WAY  
CITY-ST-ZIP HOUSTON TX 77024

TITLE V ☒ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE VCIO ☒ Delete  
NAME PEDERSON, DAVID L  
STREET ADDRESS 600 TRAVIS 70TH FLOOR  
CITY-ST-ZIP HOUSTON TX 77002

TITLE V/T ☐ Change ☒ Addition  
NAME E. ROGER GEBHART  
STREET ADDRESS 600 TRAVIS, 70TH FLOOR  
CITY-ST-ZIP HOUSTON, TX 77002

TITLE VP ☒ Delete  
NAME SABEL, MICHAEL  
STREET ADDRESS 600 TRAVIS 70TH FLOOR  
CITY-ST-ZIP HOUSTON TX 77002

TITLE V/S ☐ Change ☒ Addition  
NAME ALAN L. LANGUS  
STREET ADDRESS 600 TRAVIS, 70TH FLOOR  
CITY-ST-ZIP HOUSTON, TX 77002

13. 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SANDY B. HO

4/12/00

(713) 332-0088

Date

Daytime Phone #

CR2E034 (9/99)