

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 12, 2001 8:00 am**  
**Secretary of State**

02-12-2001 90244 044 \*\*\*150.00

**DOCUMENT # F95000003759**

1. Entity Name  
**WELLSTREAM, INC.**

Principal Place of Business  
**1700 C AVE  
 PANAMA CITY FL 32401**

Mailing Address  
**4100 CLINTON DR  
 TAX DEPT (03-11045)  
 HOUSTON TX 77020**

**00016307**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

**Attn: Licensing Dept.**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

**4100 Clinton Dr.**

City & State

City & State  
**Houston, TX**

4. FEI Number **62-1601328**

Applied For  
 Not Applicable

Zip

Country

Zip

Country

**77020**

**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  
 C/O CT CORPORATION SYSTEM  
 1200 SOUTH 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, 2001 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  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**PCOO  
 CHAPMAN, GORDON  
 1700 C AVENUE  
 PANAMA CITY FL** ☒ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**President  
 Larry E. Farmer  
 Hillpark Court, Springfield Dr.,  
 Leatherhead, Surrey KT227NL UK** ☐ Change ☒ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**VP  
 YTTBERG, CHARLES W  
 1700 C AVENUE  
 PANAMA CITY FL 32401** ☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**Executive VP & CFO  
 Gary V. Morris  
 4100 Clinton Dr.  
 Houston, TX 77020** ☐ Change ☒ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**VP  
 MCGRAW, DONALD R  
 601-JEFFERSON AVE  
 HOUSTON TX 77002** ☒ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**VP-Legal  
 Peter W. Arbour  
 4100 Clinton Dr.  
 Houston, TX 77020** ☐ Change ☒ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**DCEO  
 STANLEY, A J  
 2001 ROSS AVE, STE 4200  
 DALLAS TX 75201** ☒ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**VP & Treasurer  
 Jerry H. Blurton  
 4100 Clinton Dr.  
 Houston, TX 77020** ☐ Change ☒ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**VPD  
 GILES, THOMAS E  
 601 JEFFERSON AVE.  
 HOUSTON TX 77002** ☒ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**VP Tax  
 David R. Smith  
 4100 Clinton Dr.  
 Houston, TX 77020** ☐ Change ☒ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**VPD  
 VAUGHN, DONALD C  
 2001 ROSS AVE, STE 4200  
 DALLAS TX 75201** ☒ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**Asst. Treasurer  
 M. Steven Bender  
 4100 Clinton Dr.  
 Houston, TX 77020** ☐ Change ☒ Addition

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:

*M. Steven Bender*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**M. Steven Bender**

**2/6/2001**

Date

**713-676-5776**

Daytime Phone #

CR2E034 (10/00)