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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State

1996

F9500004498 (0)

DOCUMENT # 1. Corporation Name

CLS/WP INC.		
Principal Place of Business	Mailing Address	
P.O. BOX 1283 ARLINGTON TX 76004-1283	P.O. BOX 1283 ARUNGTON TX 76004-1283	



				JJ4-1203				
							3. Date Incorporated or Qualified 3a. Date of Last Report 09/18/1995	·· L
	Place of Business	2a.	Mailing Address				4. FEI Number Applied	d For
21		26		· · · · · · · · · · · · · · · · · · ·			75-2604734 Not Ap	plicable
Suite, Apt.	. #, etc.	27	Suite, Apt. #, etc.				5. Certificate of Status Desired See Require	
City & Stat	le		City & State				Election Campaign Financing \$5.00 May	/ Be
23		28			· · · · · · · · · · · · · · · · · · ·		Trust Fund Contribution Added to Fe	
Ζφ 1	Country	<u> </u>	Zip		ountry		 This corporation has liability for intangible tax under s 199.0 	32,
24	25	29		30			Florida Statutes Yes No	
	9. Name and Address of Cui	rrent Hegis	tered Agent		81	N1	10. Name and Address of New Registered Agent	
۸۵۶۶	AL OUADIES W				ויס	Name		
	N, CHARLES W				82	Street /	Address (P.O. Box Number is Not Acceptable)	
	N. HIATUS ROAD S-209							
SUNH	RISE FL 33351				83			
					84	City	85 Zip Code	
Table .							FL	
11. Pursuant Ar registe	to the provisions of Sections 607.0 prediagent, or both, in the State of F	502 and 60 Tarida, Such	7.1508, Florida Statu	ites, the al	bove r	named co	orporation submits this statement for the purpose of changing its register	ed office
familiar w	with, and accept the obligations of, S	Section 607.	0505, Florida Statute	DS.	e corp	OIZHOITS	s board of directors. I hereby accept the appointment as registered agent.	. I am
SIGNATURE								
	Skyral in- typext or printed name of registered a					t signature re	required when reinstating) DATE	
12.	T b	AND DIREC	_ 	13			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN	
	PUELTON CHADLES		DELETE		1 THILE		☐ Change ☐ A	Addition
NAME	SHELTON, CHARLES			12	2 NAME			
				ľ				
STREET ADDRESS	RT 3 BOX 142R					address		
C-IY SI-7P	GREENVILLE TX 75401		E- briese	1.4	CITY-S]		
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CHY ST-79 THUE NAME STREET ADDRESS CHY-ST-28 THUE	GREENVILLE TX 75401 V GREEN, CHARLES W 140 E. DEBBIE LANE		□ DELFTE	1.4 2 2 2 2 2 3 2 4 3 1	1 CITY-S 1 THLE 2 NAME 3 STREET 4 CITY-S 1 TITLE	T-ZIP ADDRESS		Addition Addition
CHY ST-7P TITE NAME STREET ADDRESS CHY-ST-ZIP THE NAME	GREENVILLE TX 75401 V GREEN, CHARLES W 140 E. DEBBIE LANE			1.4 2 2 2 2 2 3 2 4 3 3 3 2	1 TITLE 2 NAME 3 STREET 4 CITY-S 1 TITLE 2 NAME	1-ZIP Address 1-Zip		
CHY ST-ZP TIPUE NAME STREET ADDRESS CHY-SE ZIE THE NAME STREET ADDRESS	GREENVILLE TX 75401 V GREEN, CHARLES W 140 E. DEBBIE LANE			1.4 2 2 2 2 2 3 2 4 3 3 3 3 3 3	1 CITY-S 1 THLE 2 NAME 3 STREET 4 CITY-S 1 TITLE 2 NAME 3. STREET	ADDRESS T-ZIP ADDRESS		
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CHY ST-ZP TITE NAME SHRIFT ADDRESS CHY-SI-ZP TITE NAME STREPT ADDRESS CHY-SI-ZP TITE NAME	GREENVILLE TX 75401 V GREEN, CHARLES W 140 E. DEBBIE LANE		☐ DECETE	14 2 2 2 2 2 3 2 4 3 3 3 2 3 3 3 4 4 1 4 2	1 CITY-S 1 THLE 2 NAME 3 STREET 4 CITY-S 1 TITLE 2 NAME 9 STREET 4 CITY-S 1 TITLE 2 NAME	1-ZIP ADDRESS 1-ZIP ADDRESS 1-ZIP	Change#	Addition
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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 outh; that I am an officer or director of the epiporation 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 au attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/15/96 (817) 856-2015