817-390-8400

FILED

2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

Certified Article Number Mar 05, 2001 8:00 am DOCUMENT # F9500004985 7106 4575 1294 0330 *6t* **Secretary of State** PINE AND PALMETTO, INC. 03-05-2001 90293 020 ***150.00 Principal Place of Business Mailing Address 201 MAIN ST #3200 201 MAIN ST #3200 FT WORTH TX 76102 FT WORTH TX 76102 724371 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 75-2494494 Not Applicable Zip Country Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301-2525 City Zip Code FI. 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) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) ΧX Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. CR2E034 (10/00) TITLE ☐ Addition TITLE ☐ Delete Change HALLMAN, WILLIAM P JR NAME NAME STREET ADDRESS 201 MAIN ST #3200 STREET ADDRESS CITY-ST-ZIP FT WORTH TX 76102 CiTY-ST-ZIP DV ☐ Change TITLE Delete TITLE Addition STERLING, PETER NAME NAME STREET ADDRESS 201 MAIN ST #3200 STREET ADDRESS CITY-ST-ZIP FT_WORTH_TX_76102 CITY-ST-ZIP_ TITLE □ Delete TITLE ☐ Change ☐ Addition COTHAM, W. R. NAME NAME 201 MAIN ST #3200 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FT WORTH TX 76102 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition TITLE Delete TITLE. Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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)(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 appreciate of the corporation of the corporation of the corporation of the corporation of 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 appreciate of the corporation of the c

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTORY. ROBERT COTHAM