

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F95000006122

1. Entity Name

HEPC HARBOUR ISLAND, INC.

FILED
Jun 09, 2000 8:00 am
Secretary of State

06-09-2000 90012 019 ***150.00

Principal Place of Business

725 S HARBOUR ISLAND
TAMPA FL 33602
US

Mailing Address

1950 STEMMONS FREEWAY
SUITE 6001
DALLAS TX 75207-3107
US

2. Principal Place of Business

1950 Stemmons Frey

3. Mailing Address

same as above

Suite, Apt. #, etc.

11

Suite, Apt. #, etc.

4

City & State

11

City & State

4

Zip

11

Country

11

Zip

4

Country

11

4. FEI Number

75-2620721

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

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

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	D	<input type="checkbox"/> Delete
NAME	CARREKER, JAMES D	
STREET ADDRESS	1950 STEMMONS FREEWAY, SUITE 6001	
CITY-ST-ZIP	DALLAS TX 75207	
TITLE	P	<input type="checkbox"/> Delete
NAME	BENTLEY, LESLIE V	
STREET ADDRESS	1950 STEMMONS FREEWAY, SUITE 6001	
CITY-ST-ZIP	DALLAS TX	
TITLE	T	<input type="checkbox"/> Delete
NAME	JONES, LAWRENCE	
STREET ADDRESS	1950 STEMMONS #6001	
CITY-ST-ZIP	DALLAS TX 75207	
TITLE	S	<input type="checkbox"/> Delete
NAME	HOUSTON, BEVERLY M	
STREET ADDRESS	1950 STEMMONS FREEWAY, SUITE 6001	
CITY-ST-ZIP	DALLAS TX 75207	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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		
TITLE	VP & Treasurer	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Richard L. Mahoney	
STREET ADDRESS	same as above	
CITY-ST-ZIP		
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)(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]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/1/00

Date

214 863 1000

Daytime Phone #

CR2E034 (9/99)