

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**

**Jan 15, 2001 08:00 AM**  
**Secretary of State**

**DOCUMENT # F96000000015**

1. Entity Name  
**FREEMAN MANAGEMENT CORPORATION**

Principal Place of Business 1421 WEST MOCKINGBIRD LANE  DALLAS TX 752474978 US	Mailing Address 1421 WEST MOCKINGBIRD LANE  DALLAS TX 752474978 US
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2. Principal Place of Business  Suite, Apt. #, etc.	3. Mailing Address 1421 WEST MOCKINGBIRD LANE  Suite, Apt. #, etc. ATTN: DEREK W. GOFF
City & State DALLAS TX	City & State DALLAS TX
Zip 752474978	Country US

4. FEI Number  
**75-2623264**

Applied For	
Not Applicable	

5. Certificate of Status Desired  **\$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM**  
 1200 SOUTH PINE ISLAND ROAD  
  
 PLANTATION FL 33324 US

7. Name and Address of New Registered Agent

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 \_\_\_\_\_ DATE **01/15/2001**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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	
TITLE AS <input type="checkbox"/> Delete	NAME MCDONALD ROBERT E
STREET ADDRESS	1421 W MOCKINGBIRD LANE
CITY-ST-ZIP	DALLAS TX
TITLE VD <input type="checkbox"/> Delete	NAME KENNEDY KEITH
STREET ADDRESS	1421 W MOCKINGBIRD LAND
CITY-ST-ZIP	DALLAS TX
TITLE V <input type="checkbox"/> Delete	NAME MOSELEY ELLIS E
STREET ADDRESS	1421 W MOCKINGBIRD LANE
CITY-ST-ZIP	DALLAS TX
TITLE VD <input type="checkbox"/> Delete	NAME LOZIER ROBERT
STREET ADDRESS	1421 MOCKINGBIRD LANE
CITY-ST-ZIP	DALLAS TX
TITLE PD <input type="checkbox"/> Delete	NAME VAN ORT DALE
STREET ADDRESS	1421 W MOCKINGBIRD LANE
CITY-ST-ZIP	DALLAS TX
TITLE DCEO <input type="checkbox"/> Delete	NAME FREEMAN DONALD SJR.
STREET ADDRESS	1421 W MOCKINGBIRD LANE
CITY-ST-ZIP	DALLAS TX

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE AS <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME GOFF DEREK W
STREET ADDRESS	1421 W MOCKINGBIRD LANE
CITY-ST-ZIP	DALLAS TX
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 <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:** Derek W. Goff AS Date 01/15/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CR2E034 (1/1/00)