FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F9600000457

LIC VENTURES, INC. Mailing Address Principal Place of Business P. O. BOX 2030 301 CONGRESS AVE #1500 AUSTIN TX 78701 AUSTIN TX 78768 3. Date Incorporated or Qualifed 01/26/1996 4. FEI Number 2a. Mailing Address 2. Principal Place of Business 74-2772874 26 21 Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired 22 27 City & State City & State 6. Election Campaign Financing Trust Fund Contribution 28 23 Country 8. This corporation owes the current year Intangible Country Zip Zip 30 Personal Property Tax. 29 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable). 1200 SOUTH PINE ISLAND ROAD

FILED Feb 18, 1999 8:00 am Secretary of State

02-18-1999 90132 029 ***150.00



Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

□No

Not Applicable

DO NOT WRITE IN THIS SPACE

| PLANTATION FL 33324 | | | 83 | 4 s, ² | | | |
|---------------------|---|------------------------------|-------------------------------|--|---|------------------------------|----------------------|
| | | | 84 City | | FL | 85 Zip C | ode |
| office or re | to the provisions of Sections 607.0502 are egistered agent, or both, in the State of F in familiar with, and accept the obligations | londa. Such change was aut | nonzea by the comor | orporation submits this staten ation's board of directors. I he | nent for the purpose of chereby accept the appointr | nanging its i ment as reg | egistered istered |
| SIGNATURE | Signature, typed or printed name of registered agent and | title if applicable (NOTE: R | egistered Agent signature req | uired when reinstating) | DATE | | — I |
| 12. | OFFICERS AND C | | 13. | | SES TO OFFICERS AND | DIRECTO | RS IN 12 |
| TITLE | DC | ☐ DELETE | 1,1 TITLE | | | Change | ☐ Addition |
| NAME | JASTROW, KENNETH M II | | 12 NAME | | | | |
| STREET ADDRESS | 301 CONGRESS AVE #1500 | | 1.3 STREET ADDRESS | | | | ŀ |
| CITY-ST-ZIP | AUSTIN TX 78701 | | 1.4 CITY-ST-ZIP | | | | |
| TITLE | CEO | ☐ DELETE | 2.1 TITLE | | | Change | ☐ Addition |
| NAME | JASTROW, KENNETH M II | | 2.2 NAME | | | | |
| STREET ADDRESS | 301 CONGRESS AVE #1500 | | 2.3 STREET ADDRESS | | | | |
| CITY-ST-ZIP | AUSTIN TX 78701 | | 2. 4 CITY-ST-ZIP | | · +- | | |
| TITLE | DP | ☐ DELETE | 3.1 TITLE | | | Change | ☐ Addition |
| NAME | KNIGHT, CRAIG A | | 3.2 NAME | | | | |
| STREET ADDRESS | 301 CONGRESS AVE #1500 | | 3.3 STREET ADORESS | | | | |
| CITY-ST-ZIP | AUSTIN TX 78701 | | 3.4. CITY-ST-ZIP | | | | |
| TITLE | VS | ☐ DELETE | 4.1 TITLE | | | ☐ Change | ☐ Addition ∫ |
| NAME | Warner, M. Richard | | 4. 2 NAME | | | | } |
| STREET ADDRESS | 303 S TEMPLE DR | | 4.3 STREET ADDRESS | | | | ļ |
| CITY-ST-ZIP | DIBOLL TX 75941 | | 4.4 CITY-ST-ZIP | | | Change . | - Addition |
| TITLE | T | ☐ DELETE | 5.1 TITLE | | | ☐ Change | ☐ Addition |
| NAME | TURPIN, DAVID W | | 5.2 NAME | | | | |
| STREET ADDRESS | 303 S TEMPLE DR | | 5.3 STREET ADDRESS | | | | |
| CITY-ST-ZIP | DIBOLL TX 75941 | | 5.4 CITY-ST-ZIP | | | ☐ Change | Addition |
| TITLE | \$ | ☐ DELETE | 6.1 TITLE | | | □ criange | ☐ Addition |
| NAME | JOHNSTON, J. BRADLEY | | 6.2 NAME | | | | |
| STREET ADDRESS | 8333 DOUGLAS | | 6.3 STREET ADDRESS | | | | į |
| CITY-ST-ZIP | DALLAS TX 75225 | - Cir | 6.4 CITY-ST-ZIP | in Continu 110 07/2\/i\ Florid | la Ctatutae I further cortif | v that the in | formation |

I rieleby ceruly 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.