

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F96000000731

1. Entity Name  
LAMAR TEXAS GENERAL PARTNER, INC.



FILED

03 FEB 18 PM 3:37

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



☐ CHECK HERE IF MAKING CHANGES

Principal Place of Business  
5551 CORPORATE BLVD.  
BATON ROUGE LA 70808

Mailing Address  
5551 CORPORATE BLVD.  
P O BOX 66338  
BATON ROUGE LA 70896

2. Principal Place of Business  
5551 Corporate Blvd

Suite, Apt. #, etc.  
Ste 2A

City & State  
Baton Rouge LA

Zip  
70808

Country

3. Mailing Address  
P.O. Box 66338

Suite, Apt. #, etc.

City & State  
Baton Rouge LA

Zip  
70896

Country

4. FEI Number 72-1309003

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

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

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2003 Fee will be \$550.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ \$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD  
NAME REILLY, KEVIN P JR.  
STREET ADDRESS 5551 CORPORATE BLVD. Ste 2A  
CITY-ST-ZIP BATON ROUGE LA 70808 ☐ Delete

TITLE T  
NAME ISTRE, KEITH A  
STREET ADDRESS 5551 CORPORATE BLVD. Ste 2A  
CITY-ST-ZIP BATON ROUGE LA 70808 ☐ Delete

TITLE S  
NAME MCILWAIN, JAMES  
STREET ADDRESS 5551 CORPORATE BLVD. Ste 2A  
CITY-ST-ZIP BATON ROUGE LA 70808 ☐ Delete

TITLE D  
NAME MARCHAND, GERALD H  
STREET ADDRESS 5551 CORPORATE BLVD., STE. 2A  
CITY-ST-ZIP BATON ROUGE LA 70808 ☐ Delete

TITLE VP  
NAME REILLY, SEAN  
STREET ADDRESS 5551 CORPORATE BLVD Ste 2A  
CITY-ST-ZIP BATON ROUGE LA 70808 ☐ Delete

TITLE D  
NAME STEWART, T. EVERETT  
STREET ADDRESS 5551 CORPORATE BLVD., STE. 2A  
CITY-ST-ZIP BATON ROUGE LA 70808 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
600012786396 ☐ Addition  
02/19/03--01029--017 \*\*1791.25

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*KEITH A ISTRE*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-27-03

225-926-1000

Date

Daytime Phone #

CR2E034 (10/02)