

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 28, 2002 8:00 am
Secretary of State

04-28-2002 90778 019 ***150.00

DOCUMENT # F96000001309

1. Entity Name

NEW SOPOCO CORP.

Principal Place of Business

**100 CRESCENT COURT, STE 1000
DALLAS TX 75201
US**

Mailing Address

**600 E. LAS COLINAS BLVD
STE 400
IRVING TX 75039
US**

2. Principal Place of Business

600 E Las Colinas Blvd

3. Mailing Address

Suite, Apt. #, etc.

Suite 400

City & State

Irving, TX

Zip

75039

Country

USA

Zip

Country

4. FEI Number

75-2634325

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

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

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

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, 2002 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 NAME STREET ADDRESS CITY-ST-ZIP	P & DIRECTOR GUNN, G D 100 CRESCENT COURT, STE 1000 DALLAS TX <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT FRAPART, RICHARD 600 E LAS COLINAS BLVD STE 400 IRVING TX 75039 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V AINSWORTH, BRIAN 600 E LAS COLINAS BLVD STE 400 IRVING TX 75039 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D & VICE PRESIDENT ROTHENBERG, STUART M 85 BROAD STREET NEW YORK NY 10004 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MURPHY, KEN 600 E. LAS COLINAS BLVD., SUITE 1900 IRVING TX 75039 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BARGER, RON K 600 E LAS COLINAS BLVD STE 400 IRVING TX 75039 <input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition **SEE ADDENDUM ATTACHED HERETO AND INCORPORATED HEREIN**
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR MARTIN L EDELMAN 75 E 55th STREET NEW YORK, NY 10022 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR RICHARD KATZ 75 E 55th STREET NEW YORK, NY 10022 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR & VICE PRESIDENT MICHAEL NELSEN 888 SEVENTH AVE NEW YORK, NY 10106 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR & VICE PRESIDENT TODD A WILLIAMS 100 CRESCENT COURT, SUITE 1000 DALLAS, TX 75201 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR MICHAEL DOYLE 1013 CENTRE ROAD <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 607.01, Florida Statutes, and 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:

R. K. Barger **SECRETARY**

4/15/02

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)