

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F96000003121

1. Entity Name

JULINGTON - CYPRESS, INC.

FILED
Jun 14, 2001 8:00 am
Secretary of State

06-14-2001 90008 033 ***550.00

Principal Place of Business

Mailing Address

1800 W LOOP S
850
HOUSTON TX 77027
US

1800 W LOOP S
850
HOUSTON TX 77027
US

2. Principal Place of Business

3. Mailing Address

100 CONGRESS AVENUE

100 CONGRESS AVENUE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

1590

1590

City & State

City & State

AUSTIN, TX

AUSTIN, TX

Zip

Country

Zip

Country

78701

USA

78701

USA

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

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

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, 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
C
CLARK, STEPHEN T
1800 W LOOP S, 850
HOUSTON TX ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
100 CONGRESS AVENUE, SUITE 1590
AUSTIN, TX 78701 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DPST
CLARK, M T
1800 W LOOP S, 850
HOUSTON TX ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
1717 ST. JAMES PLACE, SUITE 220
HOUSTON, TX 77056 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
MAXTED, MICHELE
100 CONGRESS AVENUE, SUITE 1590
AUSTIN, TX 78701 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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

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

TITLE
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STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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

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:

Michele R. Zmar

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/11/01

Date

512 494 8510

Daytime Phone #