1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # F9600003780

1. Corporation Name

WM. CAMERON & CO.

Principal	Place	of	Bus	ine	55

Mailing Address

## FILED May 05, 1999 8:00 am Secretary of State

05-05-1999 90002 034 \*\*\*150.00



11651 PLANO ROAD. SUITE 100 11651 PLANO ROAD. SU DALLAS TX 75243 DALLAS TX 75243		UITE 100	ž 100							
		DALLIO IX 70240	DALDIO IA 70240				DO NOT WRITE IN THIS SPACE			
							3. Date Incorporated or Qualifed			
						ł	07/25/1996			
2. Principal Pl	lace of Business	2a. Mailing Address	a. Mailing Address				4. FEI Number		L A	pplied For
21 26							<u>58-1968171</u>		N	ot Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.							5. Certificate of Status Desired		·	Additional
22 27									<del></del>	equired
City & State City & State							6. Election Campaign Financing	- 🔲 -		May Be
23		28					Trust Fund Contribution			to Fees
Zip	Country	Zip		ountry		-	8. This corporation owes the curre	nt year Inta	angible □Yes	<b>∑</b> No
24	25	29	30				Personal Property Tax.	ngintared		£1110
	9. Name and Address of Cui	rent Registered Agent		81	Name		Name and Address of New R	egistereu /	ngent	
CT	CORPORATION SYSTEM			181	Name					
				82	2 Street Address (P.O. Box Number is Not Acceptable)					
	i south pine Island Road Ntation FL 33324			83						
PLAN	TIMHUN FL 33324			83			•			
				84	City			FL	85 Zip	Code
44 5	to the association of Continuo CO7	0502 and 607 1509 Florida St	atutee the	above	-named	comorat	ion submits this statement for the	ournose of	changing it	s registered
office or r	egistered agent, or both, in the St	ate of Florida. Such change wa	is authoriz	ed by	the corpo	oration's	board of directors. I hereby accep	t the appoi	ntment as r	egistered
agent. I a	m familiar with, and accept the ob	ligations of, Section 607.0505,	Florida Sta	atutes						
SIGNATURE			IOTE: Register				coinctation)	DATE		·
12.	Signature, typed or printed name of registered	AND DIRECTORS	13		it signature ii	equired wise	ADDITIONS/CHANGES TO OF		D DIRECT	ORS IN 12
	r- <u></u>	DELETE		TITLE		1		_	Change	☐ Addition
TITLE	D COAVEY DICHADD I			NAME		ŀ				i
NAME	ET ADDRESS TWELVE PIEDMONT CENTER, SUITE 210			1,3 STREET ADDRESS		]				:
										1
CITY-ST-ZIP	ATLANTA GA	☐ DELETE		TITLE	1-22	D			K] Change	☐ Addition
TITLE	PCEO-			NAME		~				
NAME	11000, HOWALD II			2.3 STREET ADDRESS		1				
STREET ADDRESS	110011211011011210					1				
_CITY_ST_ZIP	DALLAS TX	☐ DELETE		TITLE	11-2119	v	<del></del>		[X] Change	Addition
TITLE	DVP		1	NAME		\ <b>v</b>			A. ·	_
NAME	BRADBERRY, JOHN H	* 400	1		T ADDRESS					
STREET ADDRESS	!	; 100	1							
CITY-ST-ZIP	DALLAS TX	□ DELETE		CITY-S	ST-ZIP	V/T			K] Change	Addition
III/E	DVPC	C Deceie		NAME			old E. Swan			
NAME	MCELWEE, F D	- 400			T ADDDCCC		il Plano Road			
STREET ADDRESS		: 100			T ADDRESS		as, Texas 75243			
CITY-ST-ZIP	DALLAS TX	DELETE		CITY-S	I-ZIP	nari	ab, 16xab /J243		[ ] Change	Addition
TITLE	VS	₩ DECEN	1 "	NAME					go	Land
NAME	DAVIS, JOHN S	- 400			TADORESS					
STREET ADDRESS	l '	: 100								
CITY-ST-ZIP	DALLAS TX 75243	[7] 5		TITLE	(-ZIP	D/D			X Change	Addition
TITLE	D	DELETE				D/P			A.) Criange	
NAME	MURATORI, WALTER J	_		NAME	T +DDDCC0					
STREET ADDRESS		ET			TADORESS					
CITY OF TIO	TAMPA EL 3369A		6.4	CITY-S	T- ZIP	Į.				

14. 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 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.

SIGNATURE:

John S. Davis ATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/26/99

214/860-5120