## 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 # F96000006857

LUBY'S MANAGEMENT, INC.

Principal Place of Business	Mailing Address	
PO BOX 33069 SAN ANTONIO TX 78265-3069	PO BOX 33069 SAN ANTONIO TX 78265-3069	

## FILED May 10, 1999 8:00 am Secretary of State

05-10-1999 90006 005 \*\*\*150.00



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 12/30/1996 4. FEI Number Applied For 2a. Mailing Address 2. Principal Place of Business 74-2802655 Not Applicable 26 21 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 City & State ---\$5:00-May Be City & State 6-Election Campaign Financing Added to Fees Trust Fund Contribution 23 28 Country Zip Country Zip 8. This corporation owes the current year Intangible XXNo 30 Personal Property Tax. 24 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 C T CORPORATION SYSTEM 82 Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 83 Zip Code 84 85 City 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. DELETE ☐1 Change 1.1 TITLE TITLE PARKER, BARRY J C 12 NAME NAME 2211 NE LOOP 410 1.3 STREET ADDRESS STREET ADDRESS SAN ANTONIO TX 78217 1.4 CITY-ST-ZIP CITY-ST-ZIP X DELETE Change ☐ Addition 2.1 TITLE TITLE RIEMENSCHNEIDER, RONALD E 2.2 NAME NAME 2211 NE LOOP 410 2.3 STREET ADDRESS STREET ADDRESS **SAN ANTONIO TX 78217** 2.4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition DELETE 3.1 TITLE TITLE HALE, JAMES R 3.2 NAME NAME 2211 NE LOOP 410 3.3 STREET ADDRESS STREET ADDRESS SAN ANTONIO TX 78217 3.4. CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition □ DELETE 4.1 TITLE COB TITLE DAVISS, DAVID B 4. 2 NAME NAME 2211 NE LOOP 410 4.3 STREET ADDRESS STREET ADDRESS SAN ANTONIO TX 78265 4.4 CITY-ST-ZIP CITY-ST-ZIP [ ] Change ☐ Addition ☐ DELETE 51 TM F TITLE 5.2 NAME BISHOP, LAURA M NAME

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 given like empowered.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

2211 NE LOOP 410

SAN ANTONIO TX 78265

☐ DELETE

Carolyn M. Palitza

Carolyn M. Palitza

2211 NE Loop 410

VP-Financial Planning 4/23/99

[] Change

Addition

210.654.9000

(11/98) CR2E034