

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F97000002800

1. Entity Name

JPI NATIONAL CONSTRUCTION, INC.

FILED
May 03, 2000 8:00 am
Secretary of State

05-03-2000 90109 019 ***150.00

Principal Place of Business

600 EAST LAS COLINAS BLVD
 SUITE 1800
 IRVING TX 75039

Mailing Address

600 EAST LAS COLINAS BLVD
 SUITE 1800
 IRVING TX 75039-5625

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

PO Box 619091

Suite, Apt. #, etc.

City & State

Zip

Country

City & State

Dallas, TX

Zip

75261-9091

Country

4. FEI Number

75-2315447

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CORPORATION SERVICE COMPANY
 1201 HAYS STREET
 TALLAHASSEE FL 32301-2525

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, 2000 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	PD	<input type="checkbox"/> Delete
NAME	MILLER III, J F	
STREET ADDRESS	3729 CARUTH	
CITY-ST-ZIP	DALLAS TX	
TITLE	ST	<input type="checkbox"/> Delete
NAME	SCHUBERT JR, FRANK B	
STREET ADDRESS	10121 FERNDAL	
CITY-ST-ZIP	DALLAS TX	
TITLE	V	<input type="checkbox"/> Delete
NAME	PAGE, ROBERT D	
STREET ADDRESS	2020 SCHUMARD OAK LN.	
CITY-ST-ZIP	IRVING TX	
TITLE	V	<input checked="" type="checkbox"/> Delete
NAME	HARRIS, C C	
STREET ADDRESS	4320 EDMONDSON AVE	
CITY-ST-ZIP	DALLAS TX	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
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NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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.

Joe Ratliff

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Vice President Taxation

4/26/00

Date

972-556-3821

Daytime Phone #

CR2E034 (9/99)