## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # F9700003365 (0)

CAMDEN SUBSIDIARY, INC.							
							<u> </u>
Principal Place	e of Business	Mailing Address					O HAND BANDY DIAA 1881
3200 SOUTHWEST FREEWAY SUITE 1500 3200 SOUTHWEST FREEWAY				00			
HOUSTON TX 77027 HOUSTON TX 77027					DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified		
					06/27/1997		
2. Principal Place of Business 2a. Mailing Address					4. FEI Number		Applied For
21 26					76-0522167		Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc. 27				5. Certificate of Status Desired	<u> </u>	8.75 Additional Fee Required	
City & State					6. Election Campaign Financing		\$5.00 May Be
23 28 Zip Country Zip		Country		Trust Fund Contribution		Added to Fees	
Zip 24	25 29 30		<b>⊢</b> .		8. This corporation owes or has paid the current year (ntangible Personal Property Tax due Jurie 30.  Yes X No		
[29]	9. Name and Address of Current Registered Agent		130]		10. Name and Address of New Registered Agent		
BLACK, THOMAS W ESQUIRE				Name			
101 E. KENNEDY BLYD., SUITE 3700				Street Add	dress (P.O. Box Number is Not Accepta	ble)	
TAMPA FL 33602			83				
·			84	City		le.	Zip Code
				•		<u> </u>	
office or r agent. La	to the provisions of Sections 607.05 registered agent, or both, in the Stat im familiar with, and accept the oblig	.02 and 607.1508, Flori <b>da Sta</b> tut è of Florida. Such ch <b>ange was</b> gations of, Section 60 <b>7.0</b> 505, Fl	les, the above- authorized by l orida Statules.	named co the corpora	rporation submits this statement for the ation's board of directors. I hereby acce	purpose of cha pt the appointr	nging its registered nent as registered
SIGNATURE				·····		<del> </del>	
12.	Signature, typed or printed name of registered ag	gent and little if applicable (NOT VD_DIRECTORS	13.	l Bignature requ	uired when reinstating) ADDITIONS/CHANGES TO OFFI	DATE CERS AND DIR	RECTORS IN 12
TITLE	CEOD DELETE						
NAME CAMPO, RICHARD J			1.2 NAME	, ,	STEWART, H. MALCOLM	<del></del>	* **
STREET ADDRESS 3200 SOUTHWEST FREEWAY SUITE 1500					200 SOUTHWEST FREEWAY	. SUITE	1500
CITY-ST-ZIP HOUSTON TX 77027					OUSTON. TEXAS 77027	., 55412	
TITLE	PO	☐ DELETE	2.1 TITLE	V			Change 🙀 Addition
NAME	ODEN, D K		2.2 NAME	l B	SIGGS, MICHAEL W.		
STREET ADDRESS	3200 SOUTHWEST FREEWA	Y SUITE 1500	2.3 STREET A		200 SOUTHWEST FREEWAY	. SUITE	1500
CITY-ST-ZIP	HOUSTON TX 77027		2. 4 CITY - ST	-ZIP H	OUSTON, TEXAS 77027		
TITLE	VATS	DELETE	3.1 TITLE			U 1	Change
NAME	ARAA COURTHINGOT EDECMAN OUNTE 4000		3.2 NAME				
STREET ADDRESS	HOUSTON TX 77027	T SUITE 1300	3 3 STAFET A	1			
CITY-ST-ZIP	V	DELETE	3.4. CITY - ST	- ZIP			Change Addition
TITLE	HINTON, JAMES M	□ pertit	4.1 TITLE			L. '	Change Addition
NAME CTOTEX ADODGES	3200 SOUTHWEST FREEWA	V SUITE 1500	4. 2 NAME 4.3 STREET A	oonree.			
STREET ADDRESS	HOUSTON TX 77027	I COIL TODO	4.4 CITY-ST				ļ
CITY-ST-ZIP TITLE	V	☐ DELETE	5.1 TITLE	Lif			Change Addition
NAME	DIMICK, ALISON	<u> </u>	5.2 NAME			<del></del> '	<del>-</del>
STREET ADDRESS	AAAA OOUTI BURAT EDECIMAN CUUTE 4500		5.3 STREET A	.DORESS			
CITY-ST-ZIP	HOUSTON TX 77027		5.4 CITY - ST-	ì			}
TITLE			6.1 TITLE				Change Addition
NAME	DAWSON, G S		6.2 NAME				
STREET ADDRESS	3200 SOUTHWEST FREEWA	Y SUITE 1500	63 STREET A	DDRESS			}

14. 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 oals; that I am an officer or director of the corporation or the receiver entrustee 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.

6. Steven Dawson (713) 964-3555

**FILED** 

May 14 1998 8:00am

Secretary of State