

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F97000005954

1. Entity Name

BELMONTCORP.

**FILED**  
**Apr 20, 2000 8:00 am**  
**Secretary of State**

04-20-2000 90063 005 \*\*\*150.00

Principal Place of Business

Mailing Address

8550 KATY FREEWAY  
STE 300  
HOUSTON TX 77024

7777 MARKET CENTER AVE  
EL PASO TX 79912-8411  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

74-2812672

Applied For

Not Applicable

Zip

Country

Zip

Country

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 VS ☐ Delete  
NAME KLOPF, JEFFREY A  
STREET ADDRESS 125 LINCOLN AVE.  
CITY-ST-ZIP SANTA FE NM 87501

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

TITLE D ☐ Delete  
NAME MISCHER, WALTER M JR.  
STREET ADDRESS 2727 N LOOP WEST #200  
CITY-ST-ZIP HOUSTON TX 77008

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

TITLE DP ☐ Delete  
NAME WILL, PATRICIA  
STREET ADDRESS 8550 KATY FREEWAY, STE 300  
CITY-ST-ZIP HOUSTON TX 77024

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

TITLE AT ☐ Delete  
NAME SWAIM, JAMES C  
STREET ADDRESS 7777 MARKET CENTER AVE.  
CITY-ST-ZIP EL PASO TX 79912

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

TITLE AS ☐ Delete  
NAME MARKER, LUCINDA G  
STREET ADDRESS 125 LINCOLN AVENUE  
CITY-ST-ZIP SANTA FE NM 87501

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

TITLE T ☐ Delete  
NAME DURHAM, MICHAEL C  
STREET ADDRESS 8550 KATY FREEWAY, STE 300  
CITY-ST-ZIP HOUSTON TX 77024

TITLE ☐ Change ☐ 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.

SIGNATURE:

*D. Brent Shaffer, Assistant Secretary*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03/29/00

Date

(915) 877-3900

Daytime Phone #

CR2E034 (9/99)