

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 30, 2002 8:00 am
Secretary of State

01-30-2002 90147 036 ***158.75

LD 12882 A1

DOCUMENT # F980000000036

1. Entity Name

MONEY MANAGEMENT BY MAIL, INC.



Principal Place of Business

**9009 W LOOP SOUTH
 STE 700
 HOUSTON TX 77096
 US**

Mailing Address

**9009 W LOOP SOUTH
 STE 700
 HOUSTON TX 77096
 US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

54-1837741

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
 Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY
 1201 HAYS STREET
 TALLAHASSEE FL 32301-2525**

7. Name and Address of New Registered Agent

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, 2002 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 **D** ☒ Delete
 NAME **HOFFMAN, J MICHAEL**
 STREET ADDRESS **2011 HICKORY PARK DR**
 CITY-ST-ZIP **KINGWOOD TX 77345**

TITLE **D** ☒ Change ☐ Addition
 NAME **Francis D. Bailey, Jr.**
 STREET ADDRESS **33 Russell Street**
 CITY-ST-ZIP **Milton, MA 02186**

TITLE **PCD** ☐ Delete
 NAME **HAND, IVAN L JR**
 STREET ADDRESS **9009 W LOOP SOUTH STE 700**
 CITY-ST-ZIP **HOUSTON TX 77096**

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

TITLE **C** ☐ Delete
 NAME **SHELDON, SCOT E**
 STREET ADDRESS **381 LIBERTY STE 200**
 CITY-ST-ZIP **BEAUMONT TX**

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

TITLE **CFO** ☐ Delete
 NAME **JUENGEL, DAVID A**
 STREET ADDRESS **9009 WEST LOOP SOUTH, STE. 700**
 CITY-ST-ZIP **HOUSTON TX 77096**

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

TITLE **D** ☒ Delete
 NAME **SMITH, LARRY L**
 STREET ADDRESS **3000 GREEN HILL DR**
 CITY-ST-ZIP **PLANO TX 75093**

TITLE **D** ☒ Change ☐ Addition
 NAME **Peter M. Clark**
 STREET ADDRESS **17121 Sandra Lee Lane**
 CITY-ST-ZIP **Huntington Beach, CA 92649**

TITLE **S** ☐ Delete
 NAME **PETZALL, GERHARD J**
 STREET ADDRESS **100 S FOURTH ST STE 500**
 CITY-ST-ZIP **SAINT LOUIS MO 63102-1821**

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:

SIGNATURE REQUIRED

Ivan L. Hand

1/23/02

713-394-3192

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)