

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F98000005189

1. Entity Name

PFA, INC.

FILED
Jul 19, 2000 8:00 am
Secretary of State

07-19-2000 90153 026 ***550.00

Principal Place of Business

5512 W. PLANO PKWY
#100
PLANO TX 75093-5148
US

Mailing Address

5512 W. PLANO PKWY
#100
PLANO TX 75093-5148
US

2. Principal Place of Business

5512 W. Plano Pkwy

3. Mailing Address

5512 W. Plano Pkwy

Suite, Apt. #, etc.

#100

Suite, Apt. #, etc.

#100

City & State

Plano TX

City & State

Plano TX

Zip

75093

Country

US

Zip

75093

Country

US



DO NOT WRITE IN THIS SPACE

4. FEI Number

75-1914627

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

7. Name and Address of New Registered Agent

Name CT Corporation System
Street Address (P.O. Box Number is Not Acceptable)
1200 South Pine Island Road
City Plantation FL FL Zip Code 33324

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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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

TITLE	COBD	<input type="checkbox"/> Delete
NAME	FALDON, MARVIN L SR	
STREET ADDRESS	5512 W. PLANO PKWY #100	
CITY-ST-ZIP	PLANO TX 75093	
TITLE	PD	<input type="checkbox"/> Delete
NAME	FALDON, MARVIN L JR	
STREET ADDRESS	5512 W. PLANO PKWY #100	
CITY-ST-ZIP	PLANO TX 75093-5148	
TITLE	VTD	<input type="checkbox"/> Delete
NAME	BURKE, PATTIE D	
STREET ADDRESS	5512 W. PLANO PKWY #100	
CITY-ST-ZIP	PLANO TX 75093-5148	
TITLE	VD	<input type="checkbox"/> Delete
NAME	TATE, LAURA L	
STREET ADDRESS	5512 W. PLANO PKWY #100	
CITY-ST-ZIP	PLANO TX 75093-5148	
TITLE	VSD	<input type="checkbox"/> Delete
NAME	GRAY, ELIZABETH M	
STREET ADDRESS	5512 W. PLANO PKWY #100	
CITY-ST-ZIP	PLANO TX 75093-5148	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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		
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	oliverie, Elizabeth M.	
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.

SIGNATURE:

Elizabeth Oliverie Elizabeth Oliverie 7/7/00 (972) 248-6543

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/00)