**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F98000005650

USH FUNDING CORP.

Principal Place of Business

Mailing Address

<sup>\*</sup> ~ <del>600</del> ~ <del>6</del>6° ~ 600° ~ 6 XHOM9TION XXX 7782X

HOUSTONKTKX77027X

## **FILED** Jul 20, 1999 8:00 am Secretary of State

07-20-1999 90011 025 \*\*\*550.00



DO NOT WRITE IN THIS SPACE

					3. Date incorporated or Qualified 10/09/1998	
2. Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number 74-289359	9 Applied For
10707 (	707 Clay Road <b>26</b> PO Box 2863				XAPPKIEDXFØRX-	Not Applicable
Suite, Apt.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional
22		27				Fee Required
City & State					6. Election Campaign Financing	\$5.00 May Be
23 Hous tor		20			Trust Fund Contribution	Added to Fees
77041	Country USA	Zip 77252 2062	Country		8. This corporation owes the current	
24 / / 041	[23]		30 US	oA	Intangible Personal Property.	X Yes No
	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New Reg	istered Agent
				81 Name		
C T CORPORATION SYSTEM				82 Street Address (P.O. Box Number is Not Acceptable)		
1200 SOUTH PINE ISLAND ROAD						
PLAI	NTATION FL 33324		83	3		
			84	City		85 Zip Code
						FL   T
11. Pursuant	to the provisions of sections 607.0503	2 and 607.1508, Florida Statutes	s, the above	e-named co	proporation submits this statement for the purp	ose of changing its registered
office or r agent. I a	registered agent, or both, in the State im familiar with, and accept the obliga	or Fronda. Such change was a ations of, section 607.0505, Flo	iumorized by orida Statute	y trie corpo s.	oration's board of directors. I hereby accept to	ie appointment as registered
SIGNATURE _		·			•	
	Signature, typed or printed name of registered ager			Agent signatun	e required when reinstating)	DATE
12.		D DIRECTORS	13.	1	ADDITIONS/CHANGES TO OFFIC	
TITLE	PR INNER D	DELETE	1.1 TITLE 1.2 NAME			Change Addition
NAME						
STREET ADDRESS	OF EASILY TEO CI			TADDRESS		
CITY-ST-ZIP \	CLEARWATER FL		1.4 CITY-S	ST-ZIP.		
TITLE	VT	X DEFELE	2.1 TITLE		VT	Change Addition
NAME	MCCABE, RON		2.2 NAME		HARGREAVES, MARY M.	
STREET ADDRESS	311 PARK PLACE BLVD., STE	500		TADDRESS	311 Park Pĺace Blvd.,	Ste. 500
CITY-ST-ZIP	CLEARWATER FL		2.4 CITY-S	T-ZIP	Clearwater, FL 34619	
TITLE	VS	DELETE	3.1 TITLE	Ì		Change Addition
NAME	LANE, STEVEN E		3.2 NAME	į		
STREET ADDRESS	311 PARK PLACE BLVD., STE	500	3.3 STRE€	TADDRESS	10707 Clay Road	
CITY-ST-ZIP	CLEARWATER FL		3.4 CITY-S	ST-ZIP	Houston, Texas 77041	
TITLE	VAS	DELETE	4.1 TITLE	į		X Change Addition
NAME	SADOWSKI, CHESTER P		4.2 NAME		10707 Clay Dood	
STREET ADDRESS	1800 WEST LOOP SOUTH ST	E 1900	4 3 STREE	TADDRESS	10707 Clay Road	
CITY-ST-ZIP	HOUSTON TX		4.4 CITY-S	ST-ZIP	Houston, Texas 77041	
TITLE	VAS	DELETE	5.1 TITLE	Ī		Change Addition
NAME	FRUEH, GARY L		5.2 NAME		10707 Clay Road	
STREET ADDRESS	1800 WEST LOOP SOUTH ST	E 1900	5.3 STREE	TADDRESS	Houston, Texas 77041	
CITY-ST-ZIP	HOUSTON TX		5.4 CITY-S	ST-ZIP	11003 toll, 12x03 77041	
TITLE , (+	VAS. ::	DELETE	6.1 TITLE			X Change Addition
NAME	NAPOLI, THOMAS A		6.2 NAME	1	10707 Class Bood	
STREET ADDRESS	1800 WEST LOOP SOUTH ST	E 1900	6.3 STREE	T ADDRESS	10707 Clay Road	
CITY-ST-ZIP	HOUSTON TX	- ··· • •	6.4 CITY-S	1	Houston, Texas 77041	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed or on an attachment with an address.

Steven E. Lane, VP

**SIGNATURE:** 

7/13/99 713/877-2425

Daytime Phone #