

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****May 01, 2001 08:00 AM**
Secretary of State**DOCUMENT # F99000004122**1. Entity Name
TC HOUSTON TFK, INC.

Principal Place of Business % REBECCA M. SAVINO 2001 ROSS AVENUE, SUITE 3400 DALLAS TX 75201	Mailing Address % REBECCA M. SAVINO 2001 ROSS AVENUE, SUITE 3400 DALLAS TX 75201
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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
75-2832697

Applied For

Not Applicable

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 STREETTALLAHASSEE
323012525

US

FL

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

05/01/2001

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, 2001 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	EV	<input type="checkbox"/> Delete
NAME	HOLLAND JOHN A	
STREET ADDRESS	1360 POT OAK BLVD. #1800	
CITY-ST-ZIP	HOUSTON TX 77056	

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	EV	<input type="checkbox"/> Delete
NAME	HASSENFLU K A	
STREET ADDRESS	1360 POST OAK BLVD., #1800	
CITY-ST-ZIP	HOUSTON TX 77056	

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	DV	<input type="checkbox"/> Delete
NAME	COE RICHARD H	
STREET ADDRESS	2001 ROSS AVENUE, #3400	
CITY-ST-ZIP	DALLAS TX 7201	

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	EV	<input type="checkbox"/> Delete
NAME	CASEY JAMES M	
STREET ADDRESS	1360 POST OAK BLVD., #1800	
CITY-ST-ZIP	HOUSTON TX 77056	

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	AS	<input type="checkbox"/> Delete
NAME	BRAUN D. NADINE	
STREET ADDRESS	1360 POST OAK BLVD., #1800	
CITY-ST-ZIP	HOUSTON TX 77056	

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	EVD	<input type="checkbox"/> Delete
NAME	BLACKWELL H. PRYOR	
STREET ADDRESS	2001 ROSS AVENUE, #3400	
CITY-ST-ZIP	DALLAS TX 75201	

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: REBECCA M. SAVINO

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05/01/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)

REBECCA M. SAVINO/SECRETARY
2001 ROSS AVENUE, SUITE 3400

DALLAS, TX 75201