

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**May 02, 2006 08:00 AM
Secretary of State**

DOCUMENT # F99000006057

1. Entity Name
AUSTIN MAINTENANCE & CONSTRUCTION, INC.



Principal Place of Business
**8031 AIRPORT BLVD.
HOUSTON, TX 77061**

Mailing Address
**P.O. BOX 1590
DALLAS, TX 75221**



04272006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
76-0623027

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301**

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	C GAFFORD, RONALD J 3535 TRAVIS STREET, SUITE 300 DALLAS, TX 75204
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S NELSON, ELAINE 3535 TRAVIS STREET, SUITE 300 DALLAS, TX 75204
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SCHRANZ, JAMES E 3535 TRAVIS STREET, SUITE 300 DALLAS, TX 75204
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KELLY, HENRY G 8031 AIRPORT BLVD HOUSTON, TX 77061
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP FANNING, DONALD J 8031 AIRPORT BLVD HOUSTON, TX 77061
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS STAKEM, ALAN P 3535 TRAVIS STREET SUITE 300 DALLAS, TX 75204

U00000558369
05/17/06-80091-012 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

05-01-2006 214 443 5500
Date Daytime Phone #