## 2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # M0200001774

1. Entity Name

## PENTAGROUP FINANCIAL, LLC



**FILED** Feb 10, 2003 8:00 am Secretary of State 02-10-2003 90107 027 \*\*\*\*50.00

Principal Place of Business 959 CORPORATE DRIVE HOUSTON TX 77036		Mailing Address 5959 CORPORATE DRIVE HOUSTON TX 77036								
					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	85148 11811 88114 \$\$111 <b>8</b> 81	11 88111 85181	( 21 <b>6</b> 14 1 <b>86</b> 11 1 <b>86</b> 1	+ 8131 +881	
2. Principal Place of Business		3. Mailing Address								
Suite, Apt.		Suite, Apt. #, etc.		1 444	] -	CHECK HERE IF	MAKING (	CHANGES		
5959 00	RPORME DR. \$ 1400	5959 CORPORA	HB DIC	. 1900	4 CCI Number	10 1000715	·	Aor	lied For	
City & State	•	City & State			4. FEI Number	48-1260715			Applicable	
Zip	Country	Zip ·	Country	'	5. Certificate of	Status Desired		5.00 Addit ee Required		
	6. Name and Address of Current F	Registered Agent	·/		7. Name and A	ddress of New Reg	istered A	gent		
	O. Hallie Bild Addition of Tallian			Name	<del></del>					
	Corporation System South Pine Island Road		Street Address	(P.O. Box Number i	s Not Acceptable)			•		
PLAI	NTATION FL 33324									
			Ė	City	<u> </u>	-	FL	Zip Code	)	
				- 60	ared agent or both	in the State of Florid		<u> </u>	and accept	
8. The above	named entity submits this statement for ions of registered agent.	the purpose of changing its	s registerea	office or registe	ered agent, or both,	III the State of Fiore	ia. Fairie			
the obligat	ions of registered agent.								;	
SIGNATURE .	Signature, typed or printed name of registered agent a	nd title if applicable. (NO)	TE: Registered A	gent signature require	ed when reinstating)		DATE			
	digitation, types of princes		OWIII E	EE IS \$50.00						
		Make Check Payab								
			ie By May							
						ADDITIONS/C	HANGES		-	l
9.	MANAGING MEMBE		10.			7,001110110710		Change	☐ Addition	Ś
TITLE	MGRM	☐ Delete	NAME	1					_	/40/00
NAME	ROVALL, RONALD JR.			ADDRESS						
STREET ADDRESS CITY-ST-ZIP	12534 STILL HARBOUR DRIVE		CITY-S							000
	HOUSTON TX 77041	Delete	TITLE					Change	☐ Addition	Ì
TITLE NAME	MGRM   THORPE, JAMES J	. Delete	NAME							ľ
STREET ADDRESS	2031 PECAN FOREST COURT		ŞTREET	ADDRESS						İ
CITY-ST-ZIP	=RICHMOND=TX=77469=		CITY_S	ST-ZIP.	<u> </u>		سحيجب			-
TITLE	MGRM	☐ Delete	TITLE	_				☐ Change	☐ Addition	İ
NAME	LUMMIS, RANSOM C		NAME						•	İ
STREET ADDRESS	3431 INWOOD DRIVE			T ADDRESS						İ
CITY-ST-ZIP	HOUSTON TX 77019	<u> </u>	CITY-S	ST-ZIP			<del></del>			1
TITLE	MGRM	☐ Delete	TITLE					☐ Change	Addition	
NAME	RANSOM CLARK LUMMIS TRUS	ST	NAME			•				
STREET ADDRESS	910 TRAVIS, SUITE 1900			T ADDRESS						
CITY-ST-ZIP	HOUSTON TX 77002	<u></u>		ST-ZIP	<del> </del>			☐ Change	☐ Addition	ł
TITLE	MGRM	☐ Delete	TITLE					☐ culande	L. Hadidəli	
NAME	TOBITT, ROBERT		NAME	T ADDRESS						
STREET ADDRESS	100 00/11/01/11/11/11/11			ST-ZIP						
CITY-ST-ZIP	STAFFORD TX 77477							☐ Change	☐ Addition	1
TITLE		☐ Delete	, TITLE NAME	<b>I</b>						
NAME				T ADDRESS						
STREET ADDRESS	·			ST-ZIP				1		-
CITY-ST-ZIP	certify that the information supplied wit	n this filing does not qualify.			Section 119 07(3\f)	), Florida Statutes. I	further cer	tify that the i	nformation	1
. 44 lbarahu	continuithat the intormation supplied Will	a mas minici cices not quality i	TOTAL LINE CARL	I PROFIT ORGENOUS III					# .	

indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

AND TYPED OR PENTEU NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Date Date