

2001 UNIFORM BUSINESS REPORT (UBR)

0888989 AF

DOCUMENT # M99000001286

1. Entity Name

GENERAL AMERICAN CONSULTEC, LLC

FILED

01 FEB -7 PM 2:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business

9040 ROSWELL ROAD
SUITE 700
ATLANTA GA 30350

Mailing Address

2828 N. HASKELL AVE., FL 10
DALLAS TX 75204

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

58-2479287

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

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

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State

400003677814--6
-02/13/01--01109--010
*****50.00 *****50.00

9. MANAGING MEMBERS/MEMBERS

10. ADDITIONS/CHANGES

TITLE MGR ☐ Delete
NAME BRASWELL, HARVEY
STREET ADDRESS 2828 N. HASKELL AVE., FL 8
CITY-ST-ZIP DALLAS TX 75204

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE MGR ☒ Delete
NAME ARNOLD, GRAY
STREET ADDRESS 9040 ROSWELL ROAD
CITY-ST-ZIP ATLANTA GA 30350

TITLE ☐ Change ☒ Addition
NAME President
STREET ADDRESS Jefferson Dishongh
CITY-ST-ZIP 9040 Roswell Road Ste 700
Atlanta, CA 30350

TITLE MGR ☐ Delete
NAME TURMAN, DONNA
STREET ADDRESS 2828 N. HASKELL AVE., FL 10
CITY-ST-ZIP DALLAS TX 75204

TITLE ☒ Change ☐ Addition
NAME Secretary
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME Treasurer
STREET ADDRESS Elena Airaghi
CITY-ST-ZIP 3988 N. Central Expwy
Dallas TX 75204

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

11. 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 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.

SIGNATURE:

SIGNATURE REQUIRED

Donna Turman, Secretary

214-841-6197

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

CR2E083 (11/00)