

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

95 APR 26 PM 1:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N93000004026 (1)

1. Corporation Name

THE RANDALL PARR ORGANIZATION, INC.

Principal Place of Business

Mailing Address

10711 PRESTON RD
STE 101
DALLAS TX 75230
US

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STE 101
DALLAS TX 75230
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/07/1993

3a. Date of Last Report

04/25/1994

4. FEI Number

752243630 58-1815037

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

\$5.00 May Be
Added to Fees

Trust Fund Contribution

☐

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

☒

\$68.75 Supplemental
Fee Not Required

8. This corporation has liability for intangible tax under S. 100.032,
Florida Statutes

☐ Yes

☒ No

2. Principal Place of Business

21 2601 Hibernia

2a. Mailing Address

26 P.O. Box 190868

Suite, Apt. #, etc.

22 C

Suite, Apt. #, etc.

27

23 City & State
Dallas, TX 75204

28 City & State
Dallas, TX 75219

24 Zip
75204

25 Country
USA

29 Zip
75219

30 Country
USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DOSS, THOMAS E III
GREAT WESTERN BLDG.
SUITE 210, 500 E. ALTAMONTE DR.
ALTAMONTE SPRINGS FL 32701

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DP
NAME PARR, THOMAS R
STREET ADDRESS 1115 PT. NEWPORT TERR., #111
CITY-ST-ZIP CASSELBERRY FL

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS 4915 Paces Trail #415
1.4 CITY-ST-ZIP Arlington, TX 76017

☒ Change ☐ Addition

TITLE D
NAME STRANG, STEPHEN E
STREET ADDRESS 627 ESTATES PL
CITY-ST-ZIP LONGWOOD FL

2.1 TITLE D
2.2 NAME R.D. Wall
2.3 STREET ADDRESS 5 Country Glen Road
2.4 CITY-ST-ZIP Fallbrook, CA 92028

☒ Change ☐ Addition

TITLE D
NAME WARNOCK, CHARLES E
STREET ADDRESS P.O. BOX 8053 N/A
CITY-ST-ZIP LONGVIEW TX 75008

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS PR 2 Box 50
3.4 CITY-ST-ZIP Kilgore, TX 75662

☒ Change ☐ Addition

TITLE V
NAME BAIRD, RHONDA G
STREET ADDRESS 2817 PARK BRIDGE CT
CITY-ST-ZIP DALLAS TX

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP Dallas, TX 75219

☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: R. H. W. B. I. R. D.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/2/95 214-979-9411
Date (Signature Block 8)