

**2001 UNIFORM BUSINESS REPORT (UBR)****FILED****Feb 16, 2001 08:00 AM**  
**Secretary of State****DOCUMENT # P00000010913**1. Entity Name  
**WESTSTONE CORPORATION**Principal Place of Business  
10707 CLAY RD.  
  
HOUSTON TX HOUSTON TX  
77041 77041Mailing Address  
10707 CLAY RD.

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

Zip

Country

Zip

Country

4. FEI Number

**74-2944437**

Applied For

Not Applicable

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

DO NOT WRITE IN THIS SPACE

**6. Name and Address of Current Registered Agent****CT CORPORATION SYSTEM**  
**1200 S. PINE ISLAND RD.****PLANTATION**  
**33324**

US

FL

**7. Name and Address of New Registered Agent**

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 \_\_\_\_\_ **02/16/2001**  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE9. 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 ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Change ☒ Addition  
NAME VAS  
STREET ADDRESS LANE STEVEN E  
CITY-ST-ZIP 10707 CLAY RD TX 77041TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Change ☒ Addition  
NAME VAS  
STREET ADDRESS SADOWSKI CHESTER P  
CITY-ST-ZIP 10707 CLAY RD TX 77041TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Change ☒ Addition  
NAME VT  
STREET ADDRESS GANGWISCH EDWARD R  
CITY-ST-ZIP 1241 SEMORAN BLVD., UNIT 185 FL 32707TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Change ☒ Addition  
NAME VS  
STREET ADDRESS DOLAN FRANCIS J  
CITY-ST-ZIP 1241 SEMORAN BLVD., UNIT 185 FL 32707TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Change ☒ Addition  
NAME P  
STREET ADDRESS BEEMAN WALTER  
CITY-ST-ZIP 1241 SEMORAN BLVD., UNIT 185 FL 32707TITLE ☐ Delete  
NAME D  
STREET ADDRESS SLAUGHTER RICHARD G  
CITY-ST-ZIP 10707 CLAY RD. TX 77041TITLE ☐ Change ☐ 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: STEVEN E. LANE**

VAS

02/16/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)