

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P02845

1. Entity Name

DEE BROWN MASONRY, INC.

FILED

Sep 15, 2000 8:00 am
Secretary of State

09-15-2000 90019 027 ***550.00

Principal Place of Business

4101 SO. SHILOH RD
GARLAND TX 75041

Mailing Address

4101 SO. SHILOH RD
GARLAND TX 75041

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

75-0916721

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 S. 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

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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 PD
NAME BROWN, C. DEWITT JR.
STREET ADDRESS 4101 SO. SHILOH RD
CITY-ST-ZIP GARLAND TX ☒ Delete

TITLE PD
NAME Barnes Jr. Robert V.
STREET ADDRESS 4101 S. Shiloh Rd.
CITY-ST-ZIP Garland, TX ☐ Change ☒ Addition

TITLE ST
NAME HUMPHREY, MICHAEL D
STREET ADDRESS 4101 S SHILOH RD
CITY-ST-ZIP GARLAND TX ☐ Delete

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

TITLE D
NAME FOWLER, RICHARD M
STREET ADDRESS 4101 SO. SHILOH RD
CITY-ST-ZIP GARLAND TX 75041 ☐ Delete

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

TITLE D
NAME BROWN, JOANN V.
STREET ADDRESS 4101 SO. SHILOH RD
CITY-ST-ZIP GARLAND TX ☒ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

9-11-00 214-321-6443

CR2E034 (5/00)