## 2000 UNIFORM BUSINESS REPORT (UBR)

## **FILED DOCUMENT # P03352** Apr 22, 2000 8:00 am Secretary of State 1. Entity Name HOUSTON STAFFORD ELECTRIC, INC. 04-22-2000 90062 027 \*\*\*150.00 Principal Place of Business Mailing Address 10203 MULA CIRCLE P.O. BOX 947 STAFFORD TX 77497-0947 STAFFORD TX 77477 2. Principal Place of Business 3. Mailing Address Suite, Apt, #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number City & State City & State 74-1774028 Not Applicable Country Zip. Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION FL 33324 Zip Code City 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. DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. PRESIDENT Delete Addition TITLE RICHARD A. NIX BROWN, ROY D. NAME NAME 1722 LAKEBEND STREET ADDRESS STREET ADDRESS 12955 GUBBELS ROAD CITY-ST-ZIP SUGAR LAND TX 77478 CITY-ST-ZIP THOMPSONS TX 77481 Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME MUELLER, BEN L. STREET ADDRESS STREET ADDRESS 1103 MEADOWLARK LANE CITY-ST-ZIP CITY-ST-7IP SUGAR LAND TX ☐ Change ☐ Addition Delete ----TITLE - -TITLE . EVP\_\_\_\_ WAGNER, JOHN S NAME NAME STREET ADDRESS STREET ADDRESS 3831 PLEASANT VALLEY CITY-ST-ZIP CITY-ST-ZIP MISSOURI CITY TX □ Delete Change ☐ Addition TITLE VTSC TITLE NAME WILKS, WILLIAM E. STREET ADDRESS STREET ADDRESS 2426 WEATHERFORD DR. CITY-ST-ZIP CITY-ST-ZIP PEARLAND TX 77584 TITLE **VPGM** Delete Change Addition NAME PASCHAL III, JOHN W.D. STREET ADDRESS STREET ADDRESS 1515 QUIET TRAIL CITY-ST-ZIP CITY-ST-ZIP SUGAR LAND TX 77479 ☐ Change ☐ Addition ☐ Delete TITLE TITLE VPN NAME NAME POLLOCK, JON STREET ADDRESS STREET ADDRESS 518 PINE SHADOWS CITY-ST-7IP CITY-ST-ZIP HOUSTON TX 77056

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 life empowered.

SIGNATURE:

SIGNATURE:

SIGNATURE SIGNATURE DOES DESCRIPTION OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR