

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000117577

FILED  
Apr 08, 2009  
Secretary of State

Entity Name: W. M. DILLARD & ASSOCIATES OF FLORIDA, INC.

## Current Principal Place of Business:

7225 LANGTRY  
SUITE 900  
HOUSTON, TX 77040

## New Principal Place of Business:

8048 NORTHCOURT RD.  
SUITE 100  
HOUSTON, TX 77040

## Current Mailing Address:

7225 LANGTRY  
SUITE 900  
HOUSTON, TX 77040

## New Mailing Address:

8048 NORTHCOURT RD.  
SUITE 100  
HOUSTON, TX 77040

FEI Number: 20-3353370

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CHECK MATE LICENSING SERVICE  
4411 BEE RIDGE ROAD  
#257  
SARASOTA, FL 34233 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: DILLARD, WALLACE M  
Address: 8505 WYNDHAM COURT  
City-St-Zip: HOUSTON, TX 77040

Title: VPST ( ) Delete  
Name: DILLARD, MARIE  
Address: 8505 WYNDHAM COURT  
City-St-Zip: HOUSTON, TX 77040

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GAIL LOFTIN

MGR

04/08/2009

Electronic Signature of Signing Officer or Director

Date