05-05-1999 90049 032 \*\*\*150.00

DO NOT WRITE IN THIS SPACE

Mailing Address

STE 500. LB513

2911 TURTLE CREEK BLVD

DALLAS TX 75219-6245

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P14611

1. Corporation Name

Principal Place of Business

7557 RUMBLER ROAD

**DALLAS TX 75231** 

STE. 1080

**VANTAGE CONSTRUCTION COMPANY** 

| U\$ US  |  |                  |            |                          | 05/27/1987  |   |                |            |               |  |
|---|--|------------------|------------|--------------------------|---|---|----------------|------------|---------------|--|
| 2 Principal Pl  | ace of Business                                      | 2a. Mailing Add  | ress       |                          |   | 4. FEI Number                                   |                | Ar         | oplied For    |  |
| <del></del> 1   | ace of Business                                      | 26               |            |                          |   | 75-2171690                                      |                | N.         | ot Applicable |  |
| Suite, Apt. 1   | #. etc.  | Suite, Apt. 1    | #, etc.    |                          |   |   |                | \$8.75     | Additional    |  |
| 22  | .,   | 27               |            |                          |   | 5. Certifcate of Status Desired                 |                | Fee Re     | equired       |  |
| City & State City & State   |  |                  |            |                          |   | 6. Election Campaign Financin                   | g 🗆            | \$5.00     | May Be        |  |
| 23  |  |                  |            |                          |   | Trust Fund Contribution                         |                | Added      | to Fees       |  |
| Zip   | Country Zip  |                  |            | ¬                        |   | 8. This corporation owes the c                  | urrent year In |            | \             |  |
| 24  | 25 29 30   |                  |            |                          | Torontal Troporty Tax.                                |   |                |            | □No           |  |
|   | 9. Name and Address of Current                       | Registered Agent |            | 04                       | 10. Name and Address of New Registered Agent          |   |                |            |               |  |
| OT CORRODATION CYCTEM   |  |                  |            |                          | Name  |   |                |            |               |  |
| CT CORPORATION SYSTEM   |  |                  |            |                          | 82 Street Address (P.O. Box Number is Not Acceptable) |   |                |            |               |  |
| 1200 S. PINE ISLAND ROAD  |  |                  |            |                          |   |   |                |            | ———           |  |
| PLANTATION FL 33324   |  |                  |            |                          |   |   |                |            |               |  |
|   |  |                  |            | 84                       | City  |   | FL             | 85 Zip     | Code          |  |
|   |  |                  |            |                          | L   |   |                |            | registered    |  |
| 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   |  |                  |            |                          | _   |   | DATE           |            |               |  |
|   | Signature, typed or printed name of registered agent |                  |            | tered Ager               | it signature re                                       | aquired when reinstating)  ADDITIONS/CHANGES TO |                | ND DIRECT( | ORS IN 12     |  |
| 12.   | OFFICERS ANI   |                  |            | 13.<br>1.1 TITLE         |   | ADDITIONS/OFFARGES TO                           | 01110211071    | Change     | Addition      |  |
| TITLE   | P  | U                | 1          |                          | \   |   |                |            | _ \           |  |
| NAME  | FERGUSON, HAL  |                  |            | 1.2 NAME                 |   |   |                |            | }             |  |
| STREET ADDRESS  | 1231 W CAMPBELL RD                                   |                  |            |                          | ADDRESS   |   |                |            |               |  |
| CITY-ST-ZIP   | RICHARDSON TX 75080                                  |                  |            | 1.4 CITY-S<br>2.1 TITLE  | T-ZIP   |   |                | Change     | Addition      |  |
| TITLE   | VS   | Ü                |            |                          |   |   |                |            |               |  |
| NAME  | MCWILLIAMS, J RUSSELL                                | -00              |            | 2.2 NAME                 |   |   |                |            |               |  |
| STREET ADDRESS  | 2911 TURTLE CREEK BLVD, #5                           | 000              |            |                          | r address i   |   |                |            |               |  |
| CITY-ST-ZIP   | DALLAS TX 75219                                      |                  |            | 2. 4 CITY-5<br>3.1 TITLE | ST-ZIP  |   |                | ☐ Change   | Addition      |  |
| TITLE   | VT   |                  | 1          |                          | -   |   |                |            | _             |  |
| NAME  | O'NEAL, TERRY  |                  |            | 3.2 NAME                 | TADDRESS  |   |                |            |               |  |
| STREET ADDRESS  | 1231 WEST CAMPBELL RD                                |                  |            |                          |   |   |                |            | }             |  |
| CITY-ST-ZIP   | RICHARDSON TX 75080                                  |                  |            | 3.4. CITY-5<br>4.1 TITLE | 91-ZIP  |   |                | Change     | Addition      |  |
| TITLE   | VP   | J                |            | 4, 2 NAME                |   |   |                | _ *        | _             |  |
| NAME  | LEHRMANN, HAROLD W.                                  | ••               |            |                          | r 40000000  |   |                |            |               |  |
| STREET ADDRESS  | 2911 TURTLE CREEK BLVD #5                            | 00               |            |                          | TADDRESS (  |   |                |            | }             |  |
| CITY-ST-ZIP   | DALLAS TX  |                  |            | 4.4 CITY-S<br>5.1 TITLE  | 1-ZIP   |   |                | Change     | Addition      |  |
| TITLE   | D D LINOTON  | ئىن              |            | 5.2 NAME                 |   |   |                |            |               |  |
| NAME  | BELL, C HUSTON                                       |                  |            |                          | TADORESS  |   |                |            |               |  |
| STREET ADDRESS  | 2911 TURTLE CREEK BLVD #4                            | 00               |            | 5.4 CITY-S               | -   |   |                |            |               |  |
| CITY+ST-ZIP   | DALLAS TX 75219                                      |                  |            | 6.1 TITLE                |   |   |                | Change     | Addition      |  |
| TITLE   |  | <u> </u>         | DELETE     | 6.2 NAME                 |   |   |                |            |               |  |
| NAME  |  |                  |            |                          | TADDRESS  |   |                |            |               |  |
| STREET ADDRESS  |  |                  |            | 6.4 CITY-S               |   |   |                |            | 1             |  |
| CITY-ST-ZIP   |  |                  | <b>.</b> . | 0.4 CH 1+2               | 11-24   |   |                |            |               |  |

SIGNATURE:

CITY-ST-ZIP

14. 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 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 comparation or the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 or Block 14 or Block 15 or Block 1