2001 UNIFORM BUSINESS REPORT (UBR)

FILED Mar 06, 2001 8:00 am Secretary of State DOCUMENT # **P20621** 1. Entity Name ROYAL BOND, INC. 03-06-2001 90020 022 ***150.00 Principal Place of Business Mailing Address 4722 BRONZE WAY 4722 BRONZE WAY DALLAS TX 75236 DALLAS TX 75236 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 43-0488120 Not Applicable Zip Country 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 JUSTICE, JAMES H. Street Address (P.O. Box Number is Not Acceptable) 4701 16TH STREET NORTH ST PETERSBURG FL 33703 Zip Code FL 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 **CEO** TITLE ☐ Delete TITI F ☐ Change ☐ Addition FIRESTONE, JOHN W. NAME NAME 4023 GOODFELLOW STREET ADDRESS STREET ADDRESS CITY-ST-ZIP DALLAS TX CITY-ST-7IP ☐ Delete TITLE ☐ Change ☐ Addition CONNELL, JACK NAME NAME 651 ALEXAUNDRIA STREET ADDRESS STREET ADDRESS CITY-ST-7IP ST LOUIS MO CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition JULIAN, MAUREEN NAME NAME 1388 GREEN HILLS COURT STREET ADDRESS STREET ADDRESS CITY-ST-7IP **DUNCANVILLE TX** CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TiT: F ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR