

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 16, 2001 8:00 am**  
**Secretary of State**

05-16-2001 90221 050 \*\*\*158.75

**DOCUMENT # P22789**

1. Entity Name

**CARTER & BURGESS, INC.**

Principal Place of Business

**3880 HULEN  
 FT. WORTH TX 76107**

Mailing Address

**P.O. BOX 985006  
 FT. WORTH TX 76185**

2. Principal Place of Business

**777 MAIN ST.**

3. Mailing Address

**P.O. Box 901058**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

**FORT WORTH, TX**

City & State

**FORT WORTH TX**

Zip

**76102-5304**

Country

**USA**

Zip

**76101-2058**

Country

**USA**

6. Name and Address of Current Registered Agent

**CARLILE, L. FRANK  
 1000 LEGION PLACE STE 1400  
 ORLANDO FL 32801**

7. Name and Address of New Registered Agent

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 \$150.00  
 After MAY 1, 2001 Fee will be \$550.00  
 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

TITLE	PD	<input type="checkbox"/> Delete
NAME	ALLEN, JERRY W.	
STREET ADDRESS	3880 HULEN	
CITY-ST-ZIP	FT. WORTH TX	
TITLE	VD	<input type="checkbox"/> Delete
NAME	EVANS, FRED H	
STREET ADDRESS	3880 HULEN ST	
CITY-ST-ZIP	FT. WORTH TX 73107	
TITLE	VD	<input checked="" type="checkbox"/> Delete
NAME	AUGHINBAUGH, JOHN R	
STREET ADDRESS	3880 HULEN	
CITY-ST-ZIP	FT. WORTH TX	
TITLE	CD	<input checked="" type="checkbox"/> Delete
NAME	HAMMOND, WILTON N.	
STREET ADDRESS	3880 HULEN	
CITY-ST-ZIP	FT. WORTH TX	
TITLE	V	<input type="checkbox"/> Delete
NAME	JOHNSON, DAVID S	
STREET ADDRESS	3880 HULEN ST.	
CITY-ST-ZIP	FT. WORTH TX 73107	
TITLE	VDS	<input type="checkbox"/> Delete
NAME	KARR, RUSSELL A	
STREET ADDRESS	3880 HULEN	
CITY-ST-ZIP	FT. WORTH TX	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	<b>777 MAIN ST.</b>
CITY-ST-ZIP	<b>FORT WORTH, TX 76102</b>
TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	<b>777 MAIN ST.</b>
CITY-ST-ZIP	<b>FORT WORTH, TX 76102</b>
TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>VD</b>
STREET ADDRESS	<b>BEN WATTS</b>
CITY-ST-ZIP	<b>1000 LEGION PL, STE 1400 ORLANDO, FL 32801</b>
TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>VD</b>
STREET ADDRESS	<b>PHILLIP DEATON</b>
CITY-ST-ZIP	<b>7950 ELM BROOK DR, STE 250 DALLAS, TX 75247</b>
TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	<b>777 MAIN ST.</b>
CITY-ST-ZIP	<b>FORT WORTH, TX 76102</b>
TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	<b>777 MAIN ST.</b>
CITY-ST-ZIP	<b>FORT WORTH, TX 76102</b>

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:

**DAVID S. JOHNSON, SRVP 4/27/01**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)

Attachment

# P22789  
766194

Please note our new address:

Billing Address:

Carter & Burgess, Inc.

Attn: 16280

P. O. Box 901058

Fort Worth, TX 76101-2058

Physical Address:

Carter & Burgess, Inc.

777 Main Street

Fort Worth, TX 76102-5304

Phone: (817) 735-6000