

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P27830

1. Entity Name

SOUTHWEST RECREATIONAL INDUSTRIES, INC.

FILED

Apr 04, 2000 8:00 am
Secretary of State

04-04-2000 90006 018 ***150.00

Principal Place of Business

Mailing Address

701 LEANDER DR.
LEANDER TX 78641

701 LEANDER DR.
LEANDER TX 78641-2024

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 74-2315598

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

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, 2000 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD
NAME SEATON, REED J.
STREET ADDRESS 11109 PENCEWOOD
CITY-ST-ZIP AUSTIN TX ☐ Delete

TITLE VDS
NAME WEST, KEVIN C.
STREET ADDRESS 5017 SPARTANBURG COVE
CITY-ST-ZIP AUSTIN TX ☒ Delete

TITLE VD
NAME ALLISON, ROBERT G.
STREET ADDRESS 17700 N. RIM
CITY-ST-ZIP LEANDER TX ☒ Delete

TITLE T
NAME SCANLON, KATHYRN
STREET ADDRESS 8208 CLIFFVIEW DR
CITY-ST-ZIP AUSTIN TX ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE Secretary
NAME Kevin C. West
STREET ADDRESS 5017 Spartanburg Cv
CITY-ST-ZIP Austin, TX 78730 ☒ Change ☐ Addition

TITLE Vice President
NAME Robert A. Hale
STREET ADDRESS 5201 Rico Cove
CITY-ST-ZIP Austin TX 78731 ☒ Change ☐ Addition

TITLE Treasurer
NAME Judith Reitzer
STREET ADDRESS 218 Capri
CITY-ST-ZIP Austin TX 78734 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Reed J. Seaton 3-17-00 512-259-0080

Date

Daytime Phone #

CR2E034 (9/99)