

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

95 MAY -1 PM 1:26

DOCUMENT # P32680

(1)

1. Corporation Name

FIDELITY ADVISORY SERVICES CORPORATION

Principal Place of Business

2323 BRYAN STREET  
DALLAS TX 75201

Mailing Address

2323 BRYAN STREET  
DALLAS TX 75201

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

01/29/1991

3a. Date of Last Report

04/25/1994

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

4. FEI Number

75-2198694

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,  
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SASADU, CHESTER J., JR.  
2828 EAST OAKLAND BLVD  
SUITE 200  
FT LAUDERDALE FL 33306

01 Name

02 Street Address (P.O. Box Number is Not Acceptable)

03

04 City

FL

05 Zip Code

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

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

|                 |                      |
|-----------------|----------------------|
| TITLE           | P                    |
| NAME            | REA, PETER W         |
| STREET ADDRESS  | 2323 BRYAN ST        |
| CITY - ST - ZIP | DALLAS TX            |
| TITLE           | DS                   |
| NAME            | HERNDON, BOYD K.     |
| STREET ADDRESS  | 2323 BRYAN STREET    |
| CITY - ST - ZIP | DALLAS TX            |
| TITLE           | D                    |
| NAME            | BOWER, JOHN C.       |
| STREET ADDRESS  | 2323 BRYAN STREET    |
| CITY - ST - ZIP | DALLAS TX            |
| TITLE           | VP                   |
| NAME            | GENTRY, JANET        |
| STREET ADDRESS  | 2323 BRYAN ST        |
| CITY - ST - ZIP | DALLAS TX            |
| TITLE           | S                    |
| NAME            | DEVINE, K. DANIEL    |
| STREET ADDRESS  | 2323 BRYAN STREET    |
| CITY - ST - ZIP | DALLAS TX            |
| TITLE           | V                    |
| NAME            | LIVINGSTON, JAMES L. |
| STREET ADDRESS  | 2323 BRYAN STREET    |
| CITY - ST - ZIP | DALLAS TX            |

|                     |                                                                              |
|---------------------|------------------------------------------------------------------------------|
| 1.1 TITLE           | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| 1.2 NAME            |                                                                              |
| 1.3 STREET ADDRESS  |                                                                              |
| 1.4 CITY - ST - ZIP |                                                                              |
| 2.1 TITLE           | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| 2.2 NAME            |                                                                              |
| 2.3 STREET ADDRESS  |                                                                              |
| 2.4 CITY - ST - ZIP |                                                                              |
| 3.1 TITLE           | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| 3.2 NAME            |                                                                              |
| 3.3 STREET ADDRESS  |                                                                              |
| 3.4 CITY - ST - ZIP |                                                                              |
| 4.1 TITLE           | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| 4.2 NAME            |                                                                              |
| 4.3 STREET ADDRESS  |                                                                              |
| 4.4 CITY - ST - ZIP |                                                                              |
| 5.1 TITLE           | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| 5.2 NAME            |                                                                              |
| 5.3 STREET ADDRESS  |                                                                              |
| 5.4 CITY - ST - ZIP |                                                                              |
| 6.1 TITLE           | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| 6.2 NAME            | TREASURER                                                                    |
| 6.3 STREET ADDRESS  | Ben W Lutsk                                                                  |
| 6.4 CITY - ST - ZIP | 2323 Bryan Street<br>Dallas Tx 75201                                         |

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: K. Daniel Devine K. Daniel Devine, Asst. Secretary 4-19-95 612-337-6423

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone Number