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May 20 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1997

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

DOCUMENT # **P34440** **(8)**

1. Corporation Name
FAMLICO, INC.

Principal Place of Business
2909 N BUCKNER BLVD
DALLAS TX 75228
US

Mailing Address
P.O. BOX 219018
DALLAS TX 75221-9018
US

3. Date Incorporated or Qualified: **06/18/1991**
3a. Date of Last Report: **03/26/1996**

2. Principal Place of Business
21 3700 S. Stonebridge Dr
Suite, Apt. #, etc.
22
City & State
23 McKinney, TX
Zip 24 75070
Country 25 USA

2a. Mailing Address
26 P.O. Box 8080
Suite, Apt. #, etc.
27
City & State
28 McKinney, TX
Zip 29 75070
Country 30 USA

4. FEI Number: **75-2379399** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$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
CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 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 reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	D	☐ DELETE
NAME	HUDSON, C B	
STREET ADDRESS	~~2909 N BUCKNER BLVD~~	
CITY-ST-ZIP	~~DALLAS TX~~	
TITLE	VP	☐ DELETE
NAME	GAISBAUER, MICHAEL	
STREET ADDRESS	~~2909 N. BUCKNER BLVD~~	
CITY-ST-ZIP	~~DALLAS TX~~	
TITLE	S	☐ DELETE
NAME	HUTCHISON, LARRY	
STREET ADDRESS	~~2909 NORTH BUCKNER BLVD~~	
CITY-ST-ZIP	~~DALLAS TX~~	
TITLE	T	☐ DELETE
NAME	COLEMAN, GARY	
STREET ADDRESS	~~2909 NORTH BUCKNER BLVD~~	
CITY-ST-ZIP	~~DALLAS TX~~	
TITLE	D	☐ DELETE
NAME	RICHEY, R.K.	
STREET ADDRESS	2001 THIRD AVENUE SOUTH	
CITY-ST-ZIP	BIRMINGHAM AL	
TITLE	D	☐ DELETE
NAME	TUCKER, KEITH	
STREET ADDRESS	2001-3RD AVENUE SOUTH	
CITY-ST-ZIP	BIRMINGHAM AL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		☐ Change ☐ Addition
1.2 NAME	Addr Change:	
1.3 STREET ADDRESS	3700 S. Stonebridge Dr.	
1.4 CITY-ST-ZIP	McKinney, TX 75070	
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME	Addr. Change:	
2.3 STREET ADDRESS	3700 S. Stonebridge Dr.	
2.4 CITY-ST-ZIP	McKinney, TX 75070	
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME	Addr Change:	
3.3 STREET ADDRESS	3700 S. Stonebridge Dr.	
3.4 CITY-ST-ZIP	McKinney, TX 75070	
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME	Addr. Change:	
4.3 STREET ADDRESS	3700 S. Stonebridge Dr.	
4.4 CITY-ST-ZIP	McKinney, TX 75070	
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do 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 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 _____

CR2E034 (9/96)