FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JAN 31 PM 1:57

DOCUMENT # P39307 (4)

1. Corporation Name
SWBC INVESTMENT COMPANY

Principal Place of Business	Mailing Address
9311 SAN PEDRO #600 SAN ANTONIO TX 78216	9311 SAN PEDRO #600 SAN ANTONIO TX 78216

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 06/16/1992
3a. Date of Last Report: 03/22/1994

2. Principal Place of Business (21)
2a. Mailing Address (26)
4. FEI Number: 74-2606915 ☐ Applied For ☐ Not Applicable

Suite, Apt. #, etc. (22) / Suite, Apt. #, etc. (27)
5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

City & State (23) / City & State (28)
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

Zip (24) Country (25) / Zip (29) Country (30)
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD.,
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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	C	1.1 TITLE	☒ Change ☐ Addition	
NAME	AMATO, CHARLES E.	1.2 NAME	Delete entirely	
STREET ADDRESS	13634 BLUFFCIRCLE	1.3 STREET ADDRESS		
CITY-ST-ZIP	SAN ANTONIO TX	1.4 CITY-ST-ZIP		
TITLE	PD	2.1 TITLE	PDS	☒ Change ☐ Addition
NAME	BENTON, STEPHEN B.	2.2 NAME	Benton, Stephen B.	
STREET ADDRESS	2411 WILDERNESS WOOD DR	2.3 STREET ADDRESS	2411 Wilderness Wood Drive	
CITY-ST-ZIP	SAN ANTONIO TX	2.4 CITY-ST-ZIP	San Antonio, TX	
TITLE	VST	3.1 TITLE	CDVT	☒ Change ☐ Addition
NAME	DUDLEY, GARY L.	3.2 NAME	Dudley, Gary L.	
STREET ADDRESS	3415 ELM HOLLOW	3.3 STREET ADDRESS	3415 Elm Hollow	
CITY-ST-ZIP	SAN ANTONIO TX	3.4 CITY-ST-ZIP	San Antonio, TX	
TITLE	D	4.1 TITLE		☐ Change ☐ Addition
NAME	BENTON, STEPHEN B.	4.2 NAME	(Benton in block 2)	
STREET ADDRESS	2411 WILDERNESS WOOD DR.	4.3 STREET ADDRESS		
CITY-ST-ZIP	SAN ANTONIO TX	4.4 CITY-ST-ZIP		
TITLE		5.1 TITLE		☐ Change ☐ Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		

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 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: _____ 1/27/95 210/525-1241
(SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR) (Date) (Daytime Phone #)
Stephen B. Benton

0478823 FP