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2000 UNIFORM BUSINESS REPORT (UBR) FILED Mar 20, 2000 8:00 am Secretary of State **DOCUMENT # P39611** 1. Entity Name WATERS, PARKERSON & CO., INC. 03-20-2000 90140 012 \*\*\*150.00 Mailing Address Principal Place of Business 512 WHITNEY BLDG. 512 WHITNEY BLDG. 228 ST. CHARLES AVE. 228 ST. CHARLES AVE. NEW ORLEANS LA 70130-2601 **NEW ORLEANS LA 70130** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State 4. FEI Number Applied For City & State 72-0714207 Not Applicable Zin Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required - 7. Name and Address of New Registered Agent -6. Name and Address of Current Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND RD. PLANTATION FL 33324 City Zip Code FL 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 (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. PRESIDENT - DIRECTOR DAUID T POINTER
228 ST CHARLES AVE STE 5/2 **PCD** Change Addition 1 TITLE X Delete TITLE PARKERSON, GODFREY R. NAME NAME STREET ADDRESS STREET ADDRESS 228 ST. CHARLES AVE. CITY-ST-ZIP NEW ORLEADS LA 7430 CITY-ST-ZIP **NEW ORLEANS LA** VICE PRESIDENT - DIR **Change** Change Addition Addition Delete TITLE TITLE MICHAEL B WHEALDOW MARTIN, GEORGE W. NAME NAME 228 ST CHARLES AVE STE 512 STREET ADDRESS STREET ADDRESS 228 ST. CHARLES AVE. NEW ORLEADS LA 70130 CITY-ST-ZIP CITY-ST-ZIP **NEW ORLEANS LA** VICE PRESISEC TREAS ΠTLE TITLE Delete GENSLER, PHILIP JR. NAME Philip Gensler, dR NAME 228 ST CHARLES AVE STE 512 STREET ADDRESS STREET ADDRESS 228 ST. CHARLES AVE. CITY-ST-ZIP CITY-ST-ZIP **NEW ORLEANS LA** ☐ Change ☐ Addition X Delete TITLE CARROLL, FREDERICK S. NAME NAME STREET ADDRESS 228 ST. CHARLES AVE. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **NEW ORLEANS LA** ☐ Change ■ Addition DITLE ☐ Delete TITLE NAME GRISWOLD, GEORGE II NAME STREET ADDRESS STREET ADDRESS 228 ST. CHARLES AVE. **NEW ORLEANS LA** CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ Defete TITLE TITLE

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 of 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 of the corporation of the c

STREET ADDRESS CITY-ST-ZIP

**SIGNATURE:** 

NAME STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/13/00 (504) 28/20