

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # P40348 (5)

1. Corporation Name

JPI PARTNERS, INC.

Principal Place of Business

CIGNA TOWER  
600 E. LAS COLINAS BLVD., SUITE 1800  
IRVING TX 75039

Mailing Address

CIGNA TOWER  
600 E. LAS COLINAS BLVD., SUITE 1800  
IRVING TX 75039



3. Date Incorporated or Qualified

09/04/1992

3a. Date of Last Report

05/01/1995

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE FL 32301

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 the filer (if applicable)

(NOTE: Registered Agent Signature required when record change)

DATE

12. OFFICERS AND DIRECTORS

TITLE CD ☐ DELETE

NAME CARPENTER, JOHN W., III  
STREET ADDRESS 600 E. LAS COLINAS BLVD.  
CITY-ST-ZIP IRVING TX

TITLE PD ☐ DELETE

NAME MILLER, J. FRANK, III  
STREET ADDRESS 600 E. LAS COLINAS BLVD.  
CITY-ST-ZIP IRVING TX

TITLE CEO ☐ DELETE

NAME MILLER, J. FRANK, III  
STREET ADDRESS 600 E. LAS COLINAS BLVD.  
CITY-ST-ZIP IRVING TX

TITLE VST ☐ DELETE

NAME SCHUBERT, FRANK B., JR.  
STREET ADDRESS 600 E. LAS COLINAS BLVD.  
CITY-ST-ZIP IRVING TX

TITLE V ☐ DELETE

NAME HARRIS, C. CHRISTOPHER  
STREET ADDRESS 4320 EDMONDSON  
CITY-ST-ZIP DALLAS TX 75205

TITLE V ☐ DELETE

NAME INGRAM, RONALD D  
STREET ADDRESS 1300 TRAVIS CIRCLE S.  
CITY-ST-ZIP IRVING TX 75062

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

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

700001809787  
-05/06/96--01089--014  
\*\*\*200.00

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)(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 or in an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/22/96

Date

(214) 556-3821

Daytime Phone #

CR2E034 (12/95)