

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Feb 14, 2003 8:00 am
Secretary of State

02-14-2003 90180 012 ***150.00

DOCUMENT # P92000007678

1. Entity Name
WINTERVILLE GENPAR IV, INC.



Principal Place of Business
**8131 LBJ FRWY
SUITE 750
DALLAS TX 75151
US**

Mailing Address
**8131 LBJ FRWY
SUITE 750
DALLAS TX 75151
US**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

P92000007678

Zip
WINTERVILLE GENPAR IV, INC.

Country

Zip

Country

4. FEI Number **59-3153930**

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**THE PRENTICE-HALL CORPORATION SYSTEM INC.
8131 LBJ FRWY
1201 HAYS STREET
SUITE 750
SUITE 105
TALLAHASSEE FL 32301**

**8131 LBJ FRWY
SUITE 750
DALLAS TX 75151
US**

Name

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

City

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

59-3153930

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **THE PRENTICE-HALL CORPORATION SYSTEM INC.** ☐ Delete
NAME **LEE, JACK**
STREET ADDRESS **5140 YONGE STREET #1525**
CITY-ST-ZIP **WILLOWDALE ON**

TITLE **TALLAHASSEE FL 32301** ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(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 or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Michael Bentley*

Michael Bentley, ASO

Date

Daytime Phone #

2/10/2003 972.907.1890

CR2E034 (10/02)