2001 UNIFORM BUSINESS REPORT (UBR)

Mar 19, 2001 8:00 am DOCUMENT # **P97000108507** 1. Engity Name **Secretary of State** 2525 OLD FARM ROAD, INC. 03-19-2001 90500 042 ***150.00 Mailfig Address Principal Place of Business 1801 HERMITAGE BLVD. SUITE 600 1801 HERMITAGE BLVD. SUITE 600 TALLAHASSEE FL 32308 TALLAHAS'SEE FL 32308 00026909 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number 75-2751396 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name TODD, DAVID E Street Address (P.O. Box Number is Not Acceptable) 1801 HERMITAGE BLVD, SUITE 100 TALLAHASSEE FL 32308 Zip Code 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 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. DVAT X Addition TITLE TITLE ☐ Delete Lynne M. Gray NAME SMITH, G A NAME STREET ADDRESS STREET ADDRESS 8750 N CENTRAL EXPRESSWAY, STE 800 1801 Hermitage Blvd., Suite 600 CITY-ST-ZIP CITY-ST-ZIP DALLAX TX 75237 <u> Tallahassee, FL 32308</u> ☐ Delete ☐ Change TITLE TITLE PLUMLEE, D L NAME NAME Mark Faraldo STREET ADDRESS STREET ADDRESS 8750 NB CENTRAL EXPRESSWAY, STE 800 8750 N. Central Expressway, Suite 800 CITY-ST-ZIP CITY-ST-ZIP DALLAS TX 75237 <u>Dallas, TX 75231</u> DVAS ☐ Change Addition TITLE ☐ Delete TITLE VT HORTON, JAMES W NAME NAME Mark Gergik STREET ADDRESS STREET ADDRESS 1801 HERMITAGE BLVD: #600 - -8750 N. Central Expressway, Suite 800 CITY-ST-ZIP CITY-ST-ZIP TALLAHASSEE FL 32308 <u>Dallas, TX 75231</u> TITLE ☐ Change Addition TITLE ☐ Delete VAS BENNETT, DOUGLAS NAME NAME Regina Weaver STREET ADDRESS STREET ADDRESS 1801 HERMITAGE BLVD, SUITE 600 8750 N. Central Expressway, Suite 800 CITY-ST-ZIP CITY-ST-ZIP TALLAHASSEE FL 32308 <u>Dallas, TX 75231</u> ☐ Change ☐ Addition TITLE ☐ Delete TITLE FULTON, WILLIAM L NAME NAME STREET ADDRESS STREET ADDRESS 870 NORTH CENTRAL EXPRESSWAY #800 CITY-ST-ZIP CITY-ST-7IP DALLAS TX 75237 ☐ Change Addition XI Delete TITLE TITLE FULTON, WILLIAM L NAME NAME STREET ADDRESS STREET ADDRESS 870 NORTH CENTRAL EXPRESSWAY #800

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 or 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, with all other like empowered.

CITY-ST-ZIP

SIGNATURE: Douglas W. Bennett,

GAMALIEL AR 72537

CITY-ST-ZIP

7/12/01 850/488-4406

FILED