

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 09, 2003 8:00 am**  
**Secretary of State**

04-09-2003 90375 001 \*\*\*900.00

0663425 AT

**DOCUMENT # S20354**

1. Entity Name  
**CHECK EXPRESS SOUTH CAROLINA, INC.**



Principal Place of Business  
**1231 GREENWAY DRIVE  
STE. 800  
IRVING TX 75038  
US**

Mailing Address  
**1231 GREENWAY DRIVE  
STE. 800  
IRVING TX 75038  
US**



2. Principal Place of Business

3. Mailing Address

**1231 Greenway Dr.**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

**Suite 600**

City & State

City & State

**IRVING, TX**

Zip

Country

Zip

Country

**75038**

**U.S.A.**

4. FEI Number **59-3044898**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324**

Name

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

City

**FL**

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. 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)

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  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**CEOD  
NEUSTADT, DONALD H  
1231 GREENWAY DRIVE SUITE 800  
IRVING TX 75038** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**CEO / President / Director  
1231 Greenway Dr., Suite 600** ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**V  
NORRINGTON, ERIC C  
1231 GREENWAY DR SUITE 800  
IRVING TX 75038** ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**Executive V.P. / Director** ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**PD  
SHIPOWITZ, JAY B  
1231 GREENWAY DRIVE STE 800  
IRVING TX 75038** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**1231 Greenway Dr., Suite 600** ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**VST  
CONNER, JOE W  
1231 GREENWAY DRIVE STE 800  
IRVING TX 75038** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**V.P. / Secy / Treasurer / Director** ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**CD  
HEMMIG, RAYMOND C  
10000 N CENTRAL EXPWY SUITE 1  
DALLAS TX 75231** ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**1231 Greenway Dr., Suite 600** ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D  
ROSE, EDWARD W III  
500 CRESCENT CT STE 2  
DALLAS TX 75201** ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**1231 Greenway Dr., Suite 600** ☐ Change ☐ Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

**SIGNATURE**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**4/04/03**

Date

**912-550-5000**

Daytime Phone #

CR2E034 (10/02)