

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jun 09, 2000 8:00 am**  
**Secretary of State**

06-09-2000 90012 018 \*\*\*150.00

**DOCUMENT # V22114**

1. Entity Name  
**GRAND BAY MANAGEMENT COMPANY**

Principal Place of Business 1950 STEMMONS FREEWAY SUITE 6001 DALLAS TX 75207 US	Mailing Address 1950 STEMMONS FREEWAY SUITE 6001 DALLAS TX 75207-3107 US
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2. Principal Place of Business <i>Same as above</i>	3. Mailing Address <i>Same as above</i>
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Suite, Apt. #, etc. <i>"</i>	Suite, Apt. #, etc. <i>"</i>
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City & State <i>"</i>	City & State <i>"</i>
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Zip <i>"</i>	Country <i>"</i>	Zip <i>"</i>	Country <i>"</i>
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4. FEI Number **65-0331018** Applied For  Not Applicable

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



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent  
**WEISER, SHERWOOD M.**  
**3250 MARY STREET**  
**5TH FLOOR**  
**MIAMI FL 33133**

7. Name and Address of New Registered Agent  
 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.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.  (See criteria on back)

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>CEO</b> <b>CARREKER, JAMES D</b> <b>1950 STEMMONS FREEWAY, #6001</b> <b>DALLAS TX 75207</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P</b> <b>BENTLEY, LESLIE V</b> <b>1950 STEMMONS FREEWAY, #6001</b> <b>DALLAS TX 75207</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>T</b> <b>JONES, LAWRENCE J</b> <b>1950 STEMMONS FREEWAY, #6001</b> <b>DALLAS TX 75207</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S</b> <b>MORELAND, CARLA S</b> <b>1950 STEMMONS FREEWAY, #6001</b> <b>DALLAS TX 75207</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VP &amp; Treasurer</b> <b>Richard L. Mahoney</b> <b>Same as above</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>Asst. Secretary</b> <b>Beverly M. Houston</b> <b>Same as above</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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.

SIGNATURE: *[Signature]* **DEFENSE REQUIRED** Date **6/11/00** Daytime Phone # **2148631000**

CR2E034 (9/99)