

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

**APPROVED
AND
FILED**

95 APR 17 PM 2: 19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT 1995		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
---	---	--

DOCUMENT # 855111 (1)
1. Corporation Name
HATFIELD HALCOMB, INC.

Principal Place of Business 14951 DALLAS PKWY. SUITE 200 DALLAS TX 75240 US	Mailing Address 14951 DALLAS PKWY. SUITE 200 DALLAS TX 75240 US
---	---

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 12/27/1982		3a. Date of Last Report 04/15/1994	
21	22	26	27	4. FEI Number 75-1362268		Applied For Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
23	24	28	29	7. This corporation has liability for intangible tax under S. 199.002, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Zip	Country	Zip	Country				

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324				81 Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				83			
				84 City			

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 _____ DATE _____
Signature, typed or printed name of registered agent and the # state/county (NOTE: Registered Agent signature required when resigning)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HALCOMB, JERRY L.	1.2 NAME	
STREET ADDRESS	18333 PRESTON, #300, LB7	1.3 STREET ADDRESS	14951 Dallas Pkwy., Suite 200
CITY- ST- ZIP	DALLAS TX	1.4 CITY- ST- ZIP	Dallas, TX 75240
TITLE	SD	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STEWART, JAMES H., JR.	2.2 NAME	
STREET ADDRESS	18333 PRESTON, #300, LB7	2.3 STREET ADDRESS	14951 Dallas Pkwy., Suite 200
CITY- ST- ZIP	DALLAS TX	2.4 CITY- ST- ZIP	Dallas, TX 75240
TITLE	D	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CRANDELL, JAMES, E, JR	3.2 NAME	
STREET ADDRESS	18333 PRESTON, #300, LB7	3.3 STREET ADDRESS	14951 Dallas Pkwy, Suite 200
CITY- ST- ZIP	DALLAS TX	3.4 CITY- ST- ZIP	Dallas, TX 75240
TITLE	D	4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MCCONNELL, JONES C. JR.	4.2 NAME	
STREET ADDRESS	18333 PRESTON, #300 LB7	4.3 STREET ADDRESS	14951 Dallas Pkwy., Suite 200
CITY- ST- ZIP	DALLAS TX	4.4 CITY- ST- ZIP	Dallas, TX 75240
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY- ST- ZIP		5.4 CITY- ST- ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY- ST- ZIP		6.4 CITY- ST- ZIP	

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 110.07(3)(b), 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 if changed, or omitted, but with an address.

SIGNATURE:  **James H. Stewart, Jr.** 4/12/95 (214) 404-1034
Signature and typed or printed name of signing officer or director Date (Typed Name)