

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

PROFIT CORPORATION  
ANNUAL REPORT  
**1996**



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # M83933 (5)**

1. Corporation Name  
**CUTLER RIDGE FAN CLUB, INC. 7098**



Principal Place of Business: **3940 PIPESTONE ROAD DALLAS TX 75212**  
Mailing Address: **3940 PIPESTONE ROAD DALLAS TX 75212**

3. Date Incorporated or Qualified <b>06/06/1988</b>	3a. Date of Last Report <b>05/01/1995</b>
4. FEI Number <b>04-3022455</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

21. Principal Place of Business	2a. Mailing Address
22. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.
23. City & State	27. City & State
24. Zip	28. Zip
25. Country	29. Country
30. Country	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
<b>UNITED STATES CORPORATION COMPANY 1201 HAYES STREET #105 TALLAHASSEE FL 32301</b>		81. Name	
		82. Street Address (P.O. Box Number is Not Acceptable)	
		83.	
		84. City	<b>FL</b>
		85. Zip Code	

11. Pursuant to the provisions of Sections 607.0602 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: \_\_\_\_\_  
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>P</b> <input type="checkbox"/> DELETE	1.1 TITLE	<b>DIRECTOR</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>PARKS, RALPH T.</b>	1.2 NAME	<b>MICHAEL R. BRENNAN</b>
STREET ADDRESS	<b>3940 PIPESTONE ROAD</b>	1.3 STREET ADDRESS	<b>ONE THEALL ROAD</b>
CITY-ST-ZIP	<b>DALLAS TX</b>	1.4 CITY-ST-ZIP	<b>RYE, NY 10580</b>
TITLE	<b>VP</b> <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>ROACH, DONALD V.</b>	2.2 NAME	
STREET ADDRESS	<b>3940 PIPESTONE ROAD</b>	2.3 STREET ADDRESS	
CITY-ST-ZIP	<b>DALLAS TX</b>	2.4 CITY-ST-ZIP	
TITLE	<b>VP</b> <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>ALBERT, CHARLES M</b>	3.2 NAME	
STREET ADDRESS	<b>3940 PIPESTONE RD</b>	3.3 STREET ADDRESS	
CITY-ST-ZIP	<b>DALLAS TX</b>	3.4 CITY-ST-ZIP	
TITLE	<b>S</b> <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>MAYER, MARK W</b>	4.2 NAME	
STREET ADDRESS	<b>3940 PIPESTONE RD</b>	4.3 STREET ADDRESS	
CITY-ST-ZIP	<b>DALLAS TX</b>	4.4 CITY-ST-ZIP	
TITLE	<b>D</b> <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>PARKS, RALPH T</b>	5.2 NAME	
STREET ADDRESS	<b>3940 PIPESTONE RD</b>	5.3 STREET ADDRESS	
CITY-ST-ZIP	<b>DALLAS TX</b>	5.4 CITY-ST-ZIP	
TITLE	<b>D</b> <input checked="" type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>POLTZER, JERALD S</b>	6.2 NAME	
STREET ADDRESS	<b>ONE THEALL RD</b>	6.3 STREET ADDRESS	
CITY-ST-ZIP	<b>RYE NY</b>	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 119.07(3)(k), 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 on an attachment with an address.

SIGNATURE: MARK W. MAYER DATE: 2-8-96 DISTRICT PHONE #: 214-639-7765  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)