

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 14, 2001 8:00 am
Secretary of State

05-14-2001 90256 003 ***150.00

0591277

DOCUMENT # P14885

1. Entity Name
DTM COCONUT GROVE, INC.

Principal Place of Business 755 CROSSOVER LANE MEMPHIS TN 38117-4900 US	Mailing Address 9336 CIVIC CENTER DR. BEVERLY HILLS CA 90210
---	---

2. Principal Place of Business 9336 CIVIC CENTER DR	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State BEVERLY HILLS CA	City & State
Zip 90210	Country USA

4. FEI Number **86-0682711** 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
**CORPORATION SERVICE COMPANY
 1201 HAYS STREET
 TALLAHASSEE FL 32301**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

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, 2001 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	PD HUBER, KENDALL J 755 CROSSOVER LANE MEMPHIS TN 38117 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V HALE, DAN L 755 CROSSOVER LANE MEMPHIS TN 38117 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VAS HALPERN, RONALD M 755 CROSSOVER LANE MEMPHIS TN 38117 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSTD HARRISON, WILLIAM S 755 CROSSOVER LANE MEMPHIS TN 38117 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VAT MULROY, BRYAN R., JR 755 CROSSOVER LANE MEMPHIS TN 38117 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VAT STANDEFER, STEVEN W 755 CROSSOVER LANE MEMPHIS TN 38117 <input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT STEVEN P. PORTER 9336 CIVIC CENTER DR BEVERLY HILLS CA 90210 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVP + TREASURER CARLOS GARCIA 9336 CIVIC CENTER DR BEVERLY HILLS CA 90210 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VAS K. ALLEN ANDERSON 9336 CIVIC CENTER DR BEVERLY HILLS CA 90210 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP + SECRETARY M. HUE SMITH III 9336 CIVIC CENTER DR BEVERLY HILLS CA 90210 <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: M. Hue Smith III Date 4-26-01 Daytime Phone # 312-278-4321

CR2E034 (10/00)