

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Joseph B. Workman
Secretary of State
Orlando, Florida 32817-0001

APPROVED
MAY 1995

DOCUMENT # **P93000088464 (1)**

1. Corporation Name

VERO BEACH FOOTACTION, INC. 11/9/95

MAY 11 9:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2. Principal Place of Business

**ONE-THEALL ROAD
RYE NY 10580**

Mailing Address

**ONE-THEALL ROAD
RYE NY 10580**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **12/29/1993** 3a. Date of Last Report **04/28/1994**

4. FEI Number **65-0467908** Applied For Not Applicable

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

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

8. This corporation has liability for intangible tax under § 199.032, Florida Statutes: Yes No

2. Principal Place of Business

21 **1255 U.S. 1 HWY. SP #28**

2a. Mailing Address

26 **3940 PIPESTONE RD**

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

23 City & State

VERO BEACH, FL

28 City & State

DALLAS, TX

24 Zip

32960

25 County

29 Zip

75210

30 Country

9. Name and Address of Current Registered Agent

**UNITED STATES CORPORATION COMPANY
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

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 this appointment as registered agent. I am familiar with and accept the obligations of Section 607.0525, Florida Statutes.

SIGNATURE

2. Name and Address of Current Registered Agent (Print Name and Address)

3. Name and Address of New Registered Agent (Print Name and Address)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONAL CANDIDATES TO OFFICERS AND DIRECTORS (N/A)

12.1 TITLE	P
12.2 NAME	PARKS, RALPH T
12.3 STREET ADDRESS	3940 PIPESTONE RD
12.4 CITY & STATE	DALLAS TX 75212
12.5 TITLE	SVP
12.6 NAME	ALBERT, CHARLES
12.7 STREET ADDRESS	3940 PIPESTONE RD
12.8 CITY & STATE	DALLAS TX 75212
12.9 TITLE	VPT
12.10 NAME	ROACH, DONALD
12.11 STREET ADDRESS	3940 PIPESTONE ROAD
12.12 CITY & STATE	DALLAS TX 75212
12.13 TITLE	S
12.14 NAME	COUTTS, FREDERICK
12.15 STREET ADDRESS	3940 PIPESTONE ROAD
12.16 CITY & STATE	DALLAS TX
12.17 TITLE	AS
12.18 NAME	AVILES, MICHAEL
12.19 STREET ADDRESS	3940 PIPESTONE ROAD
12.20 CITY & STATE	DALLAS TX 75212
12.21 TITLE	D
12.22 NAME	QURASHI, SHAHID
12.23 STREET ADDRESS	3940 PIPESTONE ROAD
12.24 CITY & STATE	DALLAS TX

13.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.2 NAME		
13.3 STREET ADDRESS		
13.4 CITY & STATE		
13.5 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.6 NAME		
13.7 STREET ADDRESS		
13.8 CITY & STATE		
13.9 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.10 NAME	SECRETARY	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
13.11 STREET ADDRESS	MARK W. MAYER,	
13.12 CITY & STATE	3940 PIPESTONE RD	
13.13 TITLE	DALLAS, TX 75212	
13.14 NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.15 STREET ADDRESS		
13.16 CITY & STATE		
13.17 TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
13.18 NAME	DIRECTOR,	
13.19 STREET ADDRESS	SHAHID S. FOLIYER,	
13.20 CITY & STATE	ONE THEALL ROAD	
13.21 TITLE	RYE, NY 10580	

14. I do hereby certify that the information supplied with this block is voluntarily furnished and does not qualify for the exemption granted in Section 199.02(4)(b), Florida Statutes. I further certify that the information included 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 199, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report, or on an attachment with an address.

SIGNATURE: **MARK W. MAYER** 3-00-95 214-694-7755
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR