

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **P94000065182 (5)**

1. Corporation Name

**GREAT MALL FOOTACTION, INC. 385**



Principal Place of Business: **GREAT MALL TAMPA FL**  
Mailing Address: **3940 PIPESTONE ROAD DALLAS TX 75212**

3. Date Incorporated or Qualified <b>09/06/1994</b>	3a. Date of Last Report <b>05/01/1995</b>
4. FEI Number <b>59-3369233</b> <b>APPLIED FOR</b>	Applied For <input type="checkbox"/> Not Applicable <input type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

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

9. Name and Address of Current Registered Agent

**UNITED STATES CORPORATION COMPANY  
1201 HAYS ST.  
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 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 filing date. (NOTE: Registered Agent signature required when not State of Florida.)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD <b>PARKS, RALPH T</b>	1.1 TITLE	<b>DIRECTOR</b>
NAME	<b>PARKS, RALPH T</b>	1.2 NAME	<b>MICHAEL R. BRENNAN</b>
STREET ADDRESS	<b>3940 PIPESTONE RD</b>	1.3 STREET ADDRESS	<b>ONE THEALL ROAD</b>
CITY - ST - ZIP	<b>DALLAS TX 75212</b>	1.4 CITY - ST - ZIP	<b>RYE, NY 10580</b>
TITLE	V <b>ALBERT, CHARLES M</b>	2.1 TITLE	
NAME	<b>ALBERT, CHARLES M</b>	2.2 NAME	
STREET ADDRESS	<b>3940 PIPESTONE RD</b>	2.3 STREET ADDRESS	
CITY - ST - ZIP	<b>DALLAS TX 75212</b>	2.4 CITY - ST - ZIP	
TITLE	VCFD <b>ROACH, DONALD V</b>	3.1 TITLE	
NAME	<b>ROACH, DONALD V</b>	3.2 NAME	
STREET ADDRESS	<b>3940 PIPESTONE RD</b>	3.3 STREET ADDRESS	
CITY - ST - ZIP	<b>DALLAS TX 75212</b>	3.4 CITY - ST - ZIP	
TITLE	S <b>MAYER, MARK W</b>	4.1 TITLE	
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 75212</b>	4.4 CITY - ST - ZIP	
TITLE	<del>AS</del> <del><b>AVILES, MICHAEL A</b></del>	5.1 TITLE	
NAME	<del><b>AVILES, MICHAEL A</b></del>	5.2 NAME	
STREET ADDRESS	<del><b>3940 PIPESTONE RD</b></del>	5.3 STREET ADDRESS	
CITY - ST - ZIP	<del><b>DALLAS TX 75212</b></del>	5.4 CITY - ST - ZIP	
TITLE	D <b>POLITZER, JERALD S</b>	6.1 TITLE	
NAME	<b>POLITZER, JERALD S</b>	6.2 NAME	
STREET ADDRESS	<b>ONE THEALL ROAD</b>	6.3 STREET ADDRESS	
CITY - ST - ZIP	<b>RYE NY 10580</b>	6.4 CITY - ST - ZIP	

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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* **MARK W. MAYER** 2-8-96 214-634-7755  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Date of Filing

CR2E034 (12/95)