

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT

1996 7-31-96



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

OFFICE OF CORPORATIONS

B-7497

DOCUMENT # F93000004457 (8)

1. Corporation Name

TARRAGON CAPITAL CORPORATION



Principal Place of Business

Mailing Address

280 PARK AVE., EAST BLDG., 20TH FLOOR
NEW YORK NY 10017

280 PARK AVE., EAST BLDG., 20TH FLOOR
NEW YORK NY 10017

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt # etc

26 Suite, Apt #, etc

22 City & State

27 City & State

23 Zip

25 Country

29 Zip

30 Country

3. Date Incorporated or Qualified

09/30/1993

3a. Date of Last Report

09/11/1995

4. FEI Number

75-2340089

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 s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET, SUITE 105
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name CT Corporation System

82 Street Address (P.O. Box Number is Not Acceptable)

1200 South Pine Island Road

83

84 City

Plantation

FL

85 Zip Code

33324

11. Pursuant to the provisions of Sections 607.0502 and 607.1502, 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 607.0503, Florida Statutes.

SIGNATURE CT Corporation System

Timothy B. Carlson

TIMOTHY B. CARLSON
ASSISTANT SECRETARY

7/26/96

12. OFFICERS AND DIRECTORS

TITLE DS
NAME FRIEDMAN, LUCY N
STREET ADDRESS 280 PARK AVE., EAST BLDG., 20TH FLOOR
CITY-ST-ZIP NEW YORK NY 10017

TITLE PT
NAME DOYLE, JOHN A
STREET ADDRESS 280 PARK AVE., EAST BLDG., 20TH FLOOR
CITY-ST-ZIP NEW YORK NY 10017

TITLE D
NAME FRIEDMAN, TANYA E
STREET ADDRESS 883 GUERRERO STREET
CITY-ST-ZIP SAN FRANCISCO CA 02139

TITLE D
NAME FRIEDMAN, EZRA H
STREET ADDRESS 10 MAGAZINE STREET
CITY-ST-ZIP CAMBRIDGE MA 02139-KKKK

TITLE ASAT
NAME GOLDBERG, EILEEN
STREET ADDRESS 280 PARK AVE., EAST BLDG., 20TH FLOOR
CITY-ST-ZIP NEW YORK NY 10017

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

61 TITLE
62 NAME
63 STREET ADDRESS
64 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:

William S. Friedman

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/22/96 949-5000

CR2E034 (3/96)