

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 03, 2001 8:00 am
Secretary of State
05-03-2001 90076 036 ***150.00

0441838

DOCUMENT # F93000004457

1. Entity Name

TARRAGON CAPITAL CORPORATION

Principal Place of Business

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

Mailing Address

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

2. Principal Place of Business

1775 Broadway
Suite, Apt. #, etc.
23rd Floor

3. Mailing Address

3100 Monticello
Suite, Apt. #, etc.
Suite 200

City & State

New York NY

City & State

Dallas Texas

Zip

10019

Country

USA

Zip

75205

Country

USA

4. FEI Number

75-2340089

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

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

Signature, typed or printed name of registered agent and title if applicable.

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

TITLE P ☐ Delete
NAME FRIEDMAN, WILLIAM S.
STREET ADDRESS 280 PARK AVENUE EAST BLDG 20TH FLOOR
CITY-ST-ZIP NEW YORK NY

TITLE DV ☐ Delete
NAME FRIEDMAN, TANYA E
STREET ADDRESS 883 GUERRERO STREET
CITY-ST-ZIP SAN FRANCISCO CA 94110

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

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

TITLE S ☐ Delete
NAME HANSFIELD, KATHRYN
STREET ADDRESS 3100 MONTICELLO
CITY-ST-ZIP DALLAS TX 75250

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 1775 Broadway, 23rd Floor
CITY-ST-ZIP New York, NY 10019

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 1775 Broadway, 23rd Floor
CITY-ST-ZIP New York, NY 10019

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 1775 Broadway, 23rd Floor
CITY-ST-ZIP New York, NY 10019

TITLE ☒ Change ☐ Addition
NAME Mansfield, Kathryn
STREET ADDRESS 3100 Monticello, Suite 200
CITY-ST-ZIP Dallas, TX 75205

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: Kathryn Mansfield
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

KATHRYN MANSFIELD 4-9-01 214-599-2200
Date Daytime Phone #

CR2E034 (10/00)