

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **484012** (0)
1. Corporation Name
INVERRARY MANAGEMENT COMPANY



Principal Place of Business
**3030 LBJ FRWY #700
P.O. BOX 819087
DALLAS TX 75381**

Mailing Address
**3030 LBJ FRWY #700
P.O. BOX 819087
DALLAS TX 75381**

3. Date Incorporated or Qualified
09/05/1975

3a. Date of Last Report
01/31/1995

4. FEI Number
75-1479872

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

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip
24
Country
25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip
29
Country
30

9. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

10. Name and Address of New Registered Agent

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

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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and the applicable date.

Signature typed or printed name of registered agent and the applicable date.

DATE

12. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> DELETE
NAME	DICKENSON, JERRY W.	
STREET ADDRESS	3030 LBJ FRWY 700	
CITY - ST - ZIP	DALLAS, TX 00000	
TITLE	S	<input type="checkbox"/> DELETE
NAME	ADDISON, RANDOLPH	
STREET ADDRESS	14651 DALLAS PWY 700	
CITY - ST - ZIP	DALLAS, TX 00000	
TITLE	AT	<input checked="" type="checkbox"/> DELETE
NAME	ZAMBIE, R. H.	
STREET ADDRESS	3030 LBJ FRWY 700	
CITY - ST - ZIP	DALLAS, TX 00000	
TITLE	D	<input type="checkbox"/> DELETE
NAME	GRAY, JOHN	
STREET ADDRESS	3030 LBJ FRWY 700	
CITY - ST - ZIP	DALLAS, TX 00000	
TITLE	D	<input type="checkbox"/> DELETE
NAME	DICKENSON, JERRY W.	
STREET ADDRESS	3030 LBJ FRWY 700	
CITY - ST - ZIP	DALLAS, TX 00000	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

100001864521
-06/18/96--01011--010
*****200.00**

05-01-96 OR

Jeffrey Jahnke
3030 LBJ Frwy Ste 700
Dallas, TX 75234

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, Block 13, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date:

Daytime Phone #

CR2E034 (12/95)