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

**PROFIT** CORPORATION ?T



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

ANNUAL REF	POR
1996	

DOCUMENT #
1. Corporation Name

850351

(8)

<b>0</b> .	
Mailing Address	
8801 AMBASSADOR ROW DALLAS TX 75247-1622	
	8801 AMBASSADOR ROW



DALLAS TX 75247-1622			DALLAS TX 75247-1622			1				
2 Principal P	Principal Place of Business     28 Mailion Address					[ 09/15/1981		3a. Date of Last Report 05/01/1995		
21 Philiopair	lace of Business	2a. Mailing Address				4. FEI Number	-d		Applied For	
Suite, Apt.	# etc					42-0661692			Not Applicable	
22 City & State		Suite, Apt. #, etc.	·			5. Certificate of Status Desired			5 Additional Required	
23 Zip		City & State				6. Election Campaign Financing Trust Fund Contribution			00 May Be ed to Fees	
24	Country 25	Zip	Cou	ntry		8. This corporation has liability for it	ntangible ta	x under s	s 199.032.	
24	9. Name and Address of Curr	29	30			Florida Statutes Yes	□ No		,	
<del></del>	5. Name and Address of Curr	ent Registered Agent				10. Name and Address of New R	gistered /	gent		
07.00	DOODATION OVER .			81	Name					
	RPORATION SYSTEM		ŀ	82	Street Addr	ress (P.O. Box Number is Not Acceptabl	ol			
	. PINE ISLAND ROAD		ļ				o <sub>i</sub>			
PLANTA	ATION FL 33324		ſ	83						
			+	84	City			+		
				· 1	<b>,</b>		FL		ip Code	
11. Pursuant t	to the provisions of Sections 607.05	02 and 607.1508, Florida Statute	es, the abov	∕e·n	amed corpor	ration submits this statement for the purp rd of directors. I hereby accept the appo	ose of cha	nging its	registered office	
familiar wit	th, and accept the obligations of, Se	otion 607.0505, Florida Statutes	ed by the co i.	orpo	oration's boar	rd of directors. I hereby accept the appo	intment as	egistere	d agent. I am	
SIGNATURE										
	Signature, typied or printed name of registered ago	int and title if applicable. (NO	TE: Registered A	Agent	I signature required	o when reinstating)	DATE			
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC		DIRECTO	ORS IN 12	
TITLE	P _	☐ DELETE	1 1 117	LE				Change	Addition	
NAME	VANORT, DALE A.		1.2 NAN	ИE			_	, change		
STREET ADDRESS	8801 AMBASSADOR ROW		1.3 STR	EET A	ADDRESS					
CITY-ST-ZIP	DALLAS, TX 0		1.4 CITY	y - ST	(-7IP					
TITLE	SD	☐ DELETE	2 1 TIT.					Change	Addition	
NAMě	DOWIE, SANDRA L		2.2 NAM	AE.			L	Onlange	☐ Youlion	
STREET ADORESS	8801 AMBASSADOR ROW				ADDRESS					
CITY-ST-ZIP	DALLAS, TX 0		2.4 CITY		í					
THLE	V	DELETE	3 1 Till	_				Observed		
NAME	HUBER, RICHARD G.		3 2 NAM		}			Change	☐ Addition	
STREET ADDRESS	8801 AMBASSADOR ROW			_	ADDRESS					
CITY-ST-ZIP	DALLAS, TX 0		3.4 CITY		i					
TITLE	VTD	DELETE	4.1 TITL		· ZIF			Obs	F-3	
NAME	REINSCHMIDT, GEORGE H		4.2 NAM				IJ	Change	Addition	
STREET ADDRESS	8801 AMBASSADOR ROW	•			DDOCCO					
CITY-ST-ZIP	DALLAS, TX 0		4.3 STRE							
T-TLF	CD	☐ DELETE	4.4 CITY 5 1 TITLE		ZIP					
NAME	FREEMAN, DS JR				]			Change	Addition	
STREET ADDRESS	8801 AMBASSADOR ROW		5.2 NAM:							
CITY-ST-ZIP	DALLAS, TX 0		5.3 STREE		· · · · · I					
TITLE	AS	DELETE	5.4 CITY		ZIP					
NAME	MCDONALD, ROBERT E	T] nerets	6 1 TITLE					Change	☐ Addition	
STREET ADDRESS	8801 AMBASSADOR ROW		6.2 NAME		1					
CITY ST 715	DALLAC TY		6.3 STRE	ET AD	DDRESS				i	

64 CITY: \$1-ZIP

14. I do horeby 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 clirector 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 Byo. 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Date 6.4 CITY - ST - ZIP