2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT'# B9300000184 1. Entity Name CROW FAMILY 1991 LIMITED PARTNERSHIP						FILED		
					02 MAY -6 AM 10: 42			
Principal Place of Business 2100 MCKINNEY AVE STE. 700 2100 MCKINNEY AVE STE. 700 DALLAS TX 75201 DALLAS TX 75201			E. 700		SECRETARY OF STATE TALLAHASSEE. FLORIDA			
2. Principal F	3. Mailing Address	iling Address		# 100E141	LOTO LOTEO (ETTI OUSTI ODIUS UGILI NUITI OD	iif 80187 11901 19171 0161 1881		
Suite, Apt. #, etc. Suite, Apt. #, etc.					DUE BY MAY 1, 2002			
City & State City & State					4. FEI Number	75-2487203	Applied For Not Applicable	
Zip Country Zip		Zip	Country		5. Certificate o		8.75 Additional	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent				
CORPORATION SERVICE COMPANY				Name				
1201 HAYS STREET				Street Address (P.O. Box Number is Not Acceptable)				
TALLAHASSEE FL 32301-2525								
				City		FL	Zip Code	
8. The above	e named entity submits this statement	for the purpose of changing its	register	ed office or register	ed agent, or both	, in the State of Florida.		
SIGNATURE	Signature, typed or printed name of registered aget	nt and title if applicable.				DATE		
9. Capital Co as Shown	ontributions \$0.00	10. Amount of Capita in FLORIDA to da		outions	11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION			
	A GENERAL PARTNER NOTE: General Partners M	THAT IS A BUSINESS EN AY NOT be changed on the	TITY M	UST BE REGIST ; an amendmen	ERED AND AC	TIVE WITH THIS OFFICE. to change a general partr	ner.	
12.	GENERAL PARTNE	ER INFORMATION	13.			ADDRESS CHANGES ONLY	_	
DOCUMENT # NAME	S 2100 MCKINNEY AVE., STE. 700			ET ADDRESS			9/01	
STREET ADDRESS CITY-ST-ZIP				-ST-ZIP	S S S S S S S S S S S S S S S S S S S			
DOCUMENT #	-893000000000000007	STRE	REET ADDRESS					
STREET ADDRESS				7000056375176				
DOCUMENT #	DALLAG IA 73201	2/6/06	STRE	ET ADDRESS		-05/29/02010 ****193.75 *	***141.25	
STREET ADDRESS		ليبيها والمحتوان المتعاد المتعاد		-ST-ZIP			- 1	
DOCUMENT #						H- 7141.05		
NAME STREET ADDRESS				ET ADDRESS	· · · · · · · · · · · · · · · · · · ·			
CITY-ST-ZIP			CITY	-ST-ZIP		 .		
NAME			STRE	ET ADORESS				
STREET ADDRESS CITY-ST-ZIP			CITY	ST-ZIP				
DOCUMENT # NAME			STRE	ET ADDRESS				
STREET ADDRESS CITY-ST-ZIP				ST-ZIP			,	
indicated	certify that the information supplied wit on this report is true and accurate and or or trustee empowered to execute the	d that my signature shall have t	he same	legal effect as if ma	ction 119.07(3)(i), ade under oath; t	Florida Statutes. I further certify hat I am a General Partner of the	that the information e limited partnership or	

Ronald S. Brown Vice President SIGNATURE:

APR 2 3 2002