

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 14, 2003 8:00 am
Secretary of State

04-14-2003 90756 038 ***150.00

0095220 AV

DOCUMENT # F00000007096

1. Entity Name
TCR GABLES, INC.



Principal Place of Business
201 N. NEW YORK AVE., STE. 200
WINTER PARK FL 32789
US

Mailing Address
201 N. NEW YORK AVE., STE. 200
WINTER PARK FL 32789
US



2. Principal Place of Business

3. Mailing Address

6400 Congress Ave.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

STE 2100

City & State

City & State

Boca Raton, FL

Zip

Country

Zip

Country

33487

4. FEI Number 75-2911992

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	VD	Delete
NAME	CROW, HARLAN R	
STREET ADDRESS	2100 MCKINNEY AVENUE	
CITY-ST-ZIP	DALLAS TX 75201	
TITLE	PD	<input type="checkbox"/> Delete
NAME	TERWILLIGER, J. RONALD	
STREET ADDRESS	2859 PACES FERRY ROAD, #1100	
CITY-ST-ZIP	ATLANTA GA 30339	
TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	HOEKSEMA, DOUGLAS A	
STREET ADDRESS	201 N. NEW YORK AVENUE #200	
CITY-ST-ZIP	WINTER PARK FL 32789	
TITLE	VST	<input type="checkbox"/> Delete
NAME	PATTERSON, THOMAS J	
STREET ADDRESS	2001 BRYAN ST., #3700	
CITY-ST-ZIP	DALLAS TX 75201	
TITLE	AS	<input checked="" type="checkbox"/> Delete
NAME	ZANOWICK, JOAN	
STREET ADDRESS	201 N. NEW YORK AVE., STE. 200	
CITY-ST-ZIP	WINTER PARK FL 32789	
TITLE	AS	<input checked="" type="checkbox"/> Delete
NAME	SHAMBLIN, LEE ANN	
STREET ADDRESS	2001 BRYAN ST., #3700	
CITY-ST-ZIP	DALLAS TX 75201	

TITLE	PD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	michael mcgwier	
STREET ADDRESS	2859 PACES FERRY RD. STE. 1100	
CITY-ST-ZIP	Atlanta, GA 30339	
TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	alan Kolar	
STREET ADDRESS	201 N. NEW YORK AVE. STE. 200	
CITY-ST-ZIP	Winter Park, FL 32789	
TITLE	AS	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Shari Steinhart	
STREET ADDRESS	6400 Congress Ave. Ste 2100	
CITY-ST-ZIP	Boca Raton, FL 33487	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. 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 10 or Block 11 if changed, or on an attachment with an Address, with all other like empowered.

SIGNATURE:

Shari Steinhart 3-28-03 561-998-4451

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)