

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # F93000000868 (0)

1. Corporation Name

TCF, INC.



Principal Place of Business

3200 TRAMMEL CROW CENTER  
2001 ROSS AVENUE  
DALLAS TX 75201

Mailing Address

3200 TRAMMEL CROW CENTER  
2001 ROSS AVENUE  
DALLAS TX 75201

3. Date Incorporated or Qualified  
02/18/1993

3a. Date of Last Report  
02/15/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number

75-1788393

Applied For

Not Applicable

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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. I hereby 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 title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PTD ☐ DELETE

NAME CROW, TRAMMELL  
STREET ADDRESS 2001 ROSS AVENUE, #3200  
CITY-STATE-ZIP DALLAS TX

TITLE VS ☐ DELETE

NAME CROW, HARLAN R  
STREET ADDRESS 2001 ROSS AVENUE #3200  
CITY-STATE-ZIP DALLAS TX

TITLE V ☐ DELETE

NAME CROW, TRAMMELL S  
STREET ADDRESS 2001 ROSS AVENUE #3200  
CITY-STATE-ZIP DALLAS TX

TITLE AS ☐ DELETE

NAME CLOSE, JACKIE  
STREET ADDRESS 2001 ROSS AVENUE #3200  
CITY-STATE-ZIP DALLAS TX

TITLE AS ☐ DELETE

NAME GROENTEMAN, SUSAN  
STREET ADDRESS 2001 ROSS AVENUE #3200  
CITY-STATE-ZIP DALLAS TX

TITLE AS ☒ DELETE

NAME RAYMOND, ANNE  
STREET ADDRESS 2001 ROSS AVENUE #3200  
CITY-STATE-ZIP DALLAS TX

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-STATE-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-STATE-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-STATE-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-STATE-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-ZIP

AS Timothy J. Nogan  
2001 Ross Ave. #3200  
Dallas, TX 75201

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

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2-29-96

214 929 4600

CR2E034 (12/95)