

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 27, 2003 8:00 am**  
**Secretary of State**

03-27-2003 90080 022 \*\*\*150.00

**DOCUMENT # F93000000897**

1. Entity Name

**CROW-TERWILLIGER INVESTMENTS #2, INC.**



Principal Place of Business  
717 N HARDWOOD SUITE 1200  
LOCK BOX 128  
DALLAS TX 75201  
US

Mailing Address  
TRAMMEL CROW RESIDENCE  
2859 PACES FERRY RD SUITE 1400  
ATLANTA GA 30339  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **75-2426542**

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

**THE PRENTICE-HALL CORPORATION SYSTEM INC.**  
**1201 HAYS STREET**  
**SUITE 105**  
**TALLAHASSEE FL 32301**

## 7. Name and Address of New Registered Agent

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

TITLE	D	<input type="checkbox"/> Delete
NAME	CROW, HARLAN R	
STREET ADDRESS	2001 ROSS AVE., STE. 3500	
CITY-ST-ZIP	DALLAS TX 75201	
TITLE	DP	<input type="checkbox"/> Delete
NAME	TERWILLIGER, J. RONALD	
STREET ADDRESS	2859 PACES FERRY RD., STE. 1400	
CITY-ST-ZIP	ATLANTA GA 30339	
TITLE	DVP	<input type="checkbox"/> Delete
NAME	CROW, TRAMMELL S	
STREET ADDRESS	2001 ROSS AVE., STE. 3500	
CITY-ST-ZIP	DALLAS TX 75201	
TITLE	DVPT	<input type="checkbox"/> Delete
NAME	PACE, RANDY J	
STREET ADDRESS	717 N. HARWOOD, STE. 1200	
CITY-ST-ZIP	DALLAS TX 75201	
TITLE	S	<input type="checkbox"/> Delete
NAME	PACE, RANDY J	
STREET ADDRESS	717 N. HARWOOD, STE. 1200	
CITY-ST-ZIP	DALLAS TX 75201	
TITLE	V	<input type="checkbox"/> Delete
NAME	ELWELL, DAVID J.	
STREET ADDRESS	2859 PACES FERRY RD., SUITE 1400	
CITY-ST-ZIP	ATLANTA GA	

## 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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	
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:**

**SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR**

**2-17-03**

Date

Daytime Phone #

CR2E034 (10/02)