

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 # F93000002930 (6)
1. Corporation Name

CPI MANAGEMENT, INC.



Principal Place of Business

Mailing Address

5520 LBJ FRWY
STE - 430
DALLAS TX 75240
US

ONE INSIGNIA FINANCIAL PLAZA
P.O. BOX 1089
GREENVILLE SC 29602

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

3. Date Incorporated or Qualified
06/24/1993

3a. Date of Last Report
05/01/1995

4. FEI Number

75-2329372

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 S. 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 date of signature

Signature, typed or printed name of new registered agent and date of signature

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P
NAME GARRISON, FRANK M
STREET ADDRESS ONE INSIGNIA FINANCIAL PLAZA
CITY-ST-ZIP GREENVILLE SC 29602

TITLE VS
NAME LINES, JOHN K
STREET ADDRESS ONE INSIGNIA FINANCIAL PLAZA
CITY-ST-ZIP GREENVILLE SC 29602

TITLE VT
NAME URETTA, RON K
STREET ADDRESS ONE INSIGNIA FINANCIAL PLAZA
CITY-ST-ZIP GREENVILLE SC 29602

TITLE V
NAME RONCK, DAVID
STREET ADDRESS ONE INSIGNIA FINANCIAL PLAZA
CITY-ST-ZIP GREENVILLE SC 29602

TITLE V
NAME MEEK, DAVID
STREET ADDRESS ONE INSIGNIA FINANCIAL PLAZA
CITY-ST-ZIP GREENVILLE SC 29602

TITLE C
NAME LONG, MARTHA
STREET ADDRESS ONE INSIGNIA FINANCIAL PLAZA
CITY-ST-ZIP GREENVILLE SC 29602

11 TITLE AS
12 NAME BUECHLER, KELLEY, M.
13 STREET ADDRESS ONE INSIGNIA FINANCIAL PLAZA
14 CITY-ST-ZIP GREENVILLE SC

21 TITLE V/S/D
22 NAME LINES, JOHN K.
23 STREET ADDRESS ONE INSIGNIA FINANCIAL PLAZA
24 CITY-ST-ZIP GREENVILLE, SC

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

41 TITLE V
42 NAME GOLDBERG, JEFFREY L.
43 STREET ADDRESS ONE INSIGNIA FINANCIAL PLAZA
44 CITY-ST-ZIP GREENVILLE, SC

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

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

Martha C Long

4/23/96

(864) 239-1141

CR2E034 (12/95)