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95 MAY -1 AM 10:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT

1995

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

DOCUMENT # **F93000003112 (0)**

1. Corporation Name

JPI DEVELOPMENT PARTNERS, INC.

Principal Place of Business	Mailing Address
600 EAST LAS COLINAS BLVD., SUITE 1800 IRVING TX 75039	600 EAST LAS COLINAS BLVD., SUITE 1800 IRVING TX 75039

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified	3a. Date of Last Report
07/07/1993	05/01/1994

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

4. FEI Number **75-2440941** ☐ 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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	11 TITLE	Vice President	☐ Change ☒ Addition
NAME	MILLER, J. FRANK III	12 NAME	C. Christopher Harris	
STREET ADDRESS	600 E. LAS COLINAS BLVD, SUITE 1800	13 STREET ADDRESS	4320 Edmondson Avenue	
CITY-ST-ZIP	IRVING TX 75039	14 CITY-ST-ZIP	Dallas, Tx 75205	
TITLE	VST	21 TITLE	Vice President	☐ Change ☒ Addition
NAME	SCHUBERT, FRANK B JR.	22 NAME	Neil T. Brown	
STREET ADDRESS	600 E. LAS COLINAS BLVD, SUITE 1800	23 STREET ADDRESS	7900 Glades Rd., Suite 610	
CITY-ST-ZIP	IRVING TX 75039	24 CITY-ST-ZIP	Boca Raton, FL 33434	
TITLE	VST	31 TITLE	Vice President	☐ Change ☒ Addition
NAME	SCHUBERT, FRANK B JR.	32 NAME	Vanessa J. Hoffman	
STREET ADDRESS	600 E. LAS COLINAS BLVD, SUITE 1800	33 STREET ADDRESS	6017 Swiss Avenue	
CITY-ST-ZIP	IRVING TX 75039	34 CITY-ST-ZIP	Dallas, TX 75214	
TITLE	V	41 TITLE		☐ Change ☐ Addition
NAME	DORAMUS, W. MICHAEL	42 NAME		
STREET ADDRESS	600 E. LAS COLINAS BLVD, SUITE 1800	43 STREET ADDRESS		
CITY-ST-ZIP	IRVING TX 75039	44 CITY-ST-ZIP		
TITLE	CD	51 TITLE		☐ Change ☐ Addition
NAME	CARPENTER, JOHN W III	52 NAME		
STREET ADDRESS	600 EAST LAS COLINAS BLVD., SUITE 1800	53 STREET ADDRESS		
CITY-ST-ZIP	IRVING TX 75039	54 CITY-ST-ZIP		
TITLE	D	61 TITLE		☐ Change ☐ Addition
NAME	MILLER, J. FRANK	62 NAME		
STREET ADDRESS	600 EAST LAS COLINAS BLVD., SUITE 1800	63 STREET ADDRESS		
CITY-ST-ZIP	IRVING TX 75039	64 CITY-ST-ZIP		

DUPLICATE

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)(i), 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 added above with an address.

SIGNATURE: _____
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR

C. Christopher Harris — 4-28-95 — (214) 556-1700
Date — Daytime Phone #

03#2441 CF