FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F93000003519 (6)

REGENCY NATIONAL ASSOCIATES, INC.

| Principal Place of Business | Mailing Address |
|--|---------------------------------------|
| 10870 NORTH CENTRAL EXPRESSWAY, SUITE 600 DALLAS TX 75231 | 10670 NORTH CENTRA DALLAS TX 75231 |

FILED Mar 23 1998 8:00am Secretary of State

L EXPRESSWAY, SUITE 600 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/03/1993 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 75-2398851 21 26 Not Applicable Suite. Ant # etc Suite Apt #. etc. \$8.75 Additional 5. Certificate of Status Desired 27 Fee Required 22 City & State \$5.00 May Be City & State 8. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Ζφ Country Zip Country This corporation owes or has paid the current year Intangible 29 Personal Property Tax due June 30. ☐ Yes 24 25 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD Street Address (P.O. Box Number is Not Acceptable) 82 **PLANTATION FL 33324** 83 84 City Zip Code 85 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) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition TITLE 1.1 TITLE PAULSON, RANDALL M. **CR2E034** NAME 1.2 NAME 10670 N CENTRAL EXPWY., SUITE 600 STREET ADDRESS 1.3 STREET ADDRESS DALLAS TX 1.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition 2.1 TITLE TITLE HOLLAND, THOMAS A. NAME 2.2 NAME 10670 NORTH CENTRAL EXPRESSWAY, SUITE 600 STREET ADDRESS 2.3 STREET ADDRESS DALLAS TX 2. 4 CITY-ST-ZIP CITY - ST - ZIP Addition □ DELETE 3.1 TITLE Change TITLE WALDMAN, ROBERT A 3.2 NAME NAME 10670 NORTH CENTRAL EXPRESSWAY, SUITE 600 STREET ADDRESS 3 3 STREET ADDRESS DALLAS TX 75231 CITY-ST-ZIP 3.4. CITY-ST-ZIP Change Addition TITLE 4.1 TITLE POTERA, DREW D 4.2 NAME NAME 10670 NORTH CENTRAL EXPRESSWAY, SUITE 600 STREET ADDRESS 4.3 STREET ADDRESS DALLAS TX 75231 CITY-ST-ZIP 4.4 C(TY - ST - Z)P DELETE Change ___ Addition TITLE 5.1 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Addition Change 6.1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY - ST - ZIP

14. 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 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:

3/5/98

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