

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 19, 2004 08:00 AM
Secretary of State

DOCUMENT # F93000005479

1. Entity Name

TCR SFA CONGRESS PARK, INC.



Principal Place of Business

2001 BRYAN STREET
SUITE 3700
DALLAS, TX 75201

Mailing Address

2001 BRYAN STREET
SUITE 3700
DALLAS, TX 75201



04082004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number

75-2511115

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301

**DO NOT WRITE
IN THIS SPACE**

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, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	HOEKSEMA, DOUGLAS A
STREET ADDRESS	201 N. NEW YORK AVENUE., STE 200
CITY-ST-ZIP	WINTER PARK, FL 52789
TITLE	VD
NAME	TERWILLIGER, RONALD J
STREET ADDRESS	2850 PACES FERRY ROAD., STE 1100
CITY-ST-ZIP	ATLANTA, GA 30339
TITLE	VPT
NAME	COLLINS, MICHAEL
STREET ADDRESS	1810 GATEWAY DR STE 100
CITY-ST-ZIP	SAN MATEO, CA 94404
TITLE	VSAT
NAME	PATTERSON, THOMAS J
STREET ADDRESS	2001 BRYAN STREET STE 3700
CITY-ST-ZIP	DALLAS, TX 75201
TITLE	AS
NAME	STEINHARDT, SHARI
STREET ADDRESS	6400 CONGRESS AVE STE 2100
CITY-ST-ZIP	BOCA RATON, FL 33487
TITLE	AS
NAME	BROWN, PEGGY E
STREET ADDRESS	2001 BRYAN STREET STE 3700
CITY-ST-ZIP	DALLAS, TX 75201

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4/19/04-80101-003 150.00

**DO NOT WRITE
IN THIS SPACE**

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

Date

Daytime Phone #