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CORPORATION **ANNUAL REPORT 19**98



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name F93000005481 (7)

TCR CP DEVELOPMENT, INC.

FILED

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SECRETARY OF STATE TALLAHASSEE, FLORIDA



				
Principal Place of Business	ess Mailing Address Hithiu ill I		TIMBE (MIMI KIMI IMAL	
0400-00M3RESS AVE BUITE-2000- BOCA RATON FE-83487	0400 CONGRESS AVE SUITE 2000 — BOGA RATON FL 33487 —	DO NOT WRITE IN THIS SPAC 3. Date Incorporated or Qualified 12/02/1993	E	
2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For	
21 717 N. Harwood	26 717 N. Han	200 J 75-2511116	Not Applicable	
Suite, Apt. #, etc.	Suite, Apt. #, etc. 27 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	5. Certificate of Status Desired 38	.75 Additional ee Required	
City & State 23 Dallou TX	City & State 28 Dallas TX		5.00 May Be dded to Fees	
Zip Country 24 75201 25 USA	29 つらてのし 30	ntry SA This corporation owes or has paid the current y Personal Property Tax due June 30. ☐ Yes		
9. Name and Address of Current Registered Agent		 Name and Address of New Registered Agent 	10. Name and Address of New Registered Agent	
FICH, DEBORAH L:- 8400 CONGRESS AVENUE SUITE 2000 -		81 Name Copposition Service Composition Street Address (P.O. Box Number is Not Acceptable) 1201 Hays Street	any	
BOCA RATON FL 33487		83		
		84 City Tallahassee FL 85	32801	
 Pursuant to the provisions of Sections 607.050)2 and 607 1508, Florida Statutes, the a	pove-named corporation submits this statement for the purpose of chan	ging its registered	

office or registered agent, or both, it is State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I are amiliar with, and agent the abligations of, Section 607.0505, Florida Statutes.

1.1 TITLE

2.2 NAM6

3.1 THILE

3.2 NAME

4.1 TITLE

4. 2 NAME

51 THLE

5.2 NAME

6.1 TITLE

6.2 NAME

2.3 STREET ADDRESS

3.3 STREET ADDRESS

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

3.4. CITY-ST-ZIP

2. 4 City - \$1 - ZiP

OFFICERS AND DIRECTORS

(NOTE: Registered Agent signature required when reinstating) 13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ☐ Change **X** Addition

WHEELER, CHRIS D 1.2 NAME 6400 Congress Ave., Ste. 1000 6400 CONGRESS AVENUE, STE 2000 STREET ADDRESS 1.3 STREET ADDRESS Boca Raton, FL 33487 **BOCA RATON FL** 1.4 CITY-ST-ZIP DELETE VD 2.1 TITLE 29

DELETE

DELETE

DELETE

DELETE

DELETE

TERWILLIGER, J R 2859 PACES FERRY RD, STE 1400 **ATLANTA GA**

۷D CROW, HARLAN R

STREET ADDRESS 2001 ROSS AVENUE, STE 3500 **DALLAS TX** CITY-ST-ZIP

TITLE VTS PACE, RANDY J NAME 717 N. HARWOOD, STE 1200 STREET ADDRESS DALLAS TX

TITLE NAME **BRYANT**, BRADLEY D 6400 CONGRESS AVENUE, STE 2000 STREET ADDRESS **BOCA RATON FL** CITY-ST-ZIP

TITLE AS NAME FISH, DEBORAH L STREET ADDRESS

12.

TITLE

NAME

TITLE

NAME

TITLE

NAME

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

PD

6400 CONGRESS AVENUE, STE 2000 **BOCA RATON FL**

AS

Steinhardt, Shari

Change Terwilliger, J R 2859 Paces Ferry Rd, Ste. 1400

Atlanta GA Change Addition

500002498805--2 -04/24/38--01007--003

****150.00 ****150.00

Change Addition

Change	Û.	Addi	10
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CITY-ST-ZIP 14. I hereby certify that the information supplied with this fiting 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.

Addition