

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jan 22, 2000 8:00 am**  
**Secretary of State**

01-22-2000 90037 005 \*\*\*150.00

**DOCUMENT # F94000001093**

1. Entity Name

**GAC GROUND LEASE CORPORATION**

**904246**



DO NOT WRITE IN THIS SPACE

Principal Place of Business 1700 PACIFIC AVENUE SUITE 3800 DALLAS TX 75201	Mailing Address 1700 PACIFIC AVENUE SUITE 3800 DALLAS TX 75201-4691 US
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number <b>75-2525462</b>	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
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6. Name and Address of Current Registered Agent  <b>C T CORPORATION SYSTEM 1200 S. PINE ISLAND RD. PLANTATION FL 33324</b>
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7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	
<b>FL</b>	Zip Code

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.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. <input type="checkbox"/> (See criteria on back)	<b>FILE NOW!!! FEE IS \$150.00</b> <b>After MAY 1, 2000 Fee will be \$550.00</b> <b>Make Check Payable to Department of State</b>	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE <b>P</b>	<input type="checkbox"/> Delete <b>SHELBY, CHARLES P JR 1700 PACIFIC AVE SUITE 3800 DALLAS TX</b>	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME <b>VP</b>	<input type="checkbox"/> Delete <b>WEBSTER, MICHAEL 1700 PACIFIC AVENUE STE 3800 DALLAS TX 75201</b>	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS <b>T</b>	<input type="checkbox"/> Delete <b>BOGGESE, JERRY 1700 PACIFIC AVENUE SUITE 3800 DALLAS TX</b>	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
CITY-ST-ZIP <b>D</b>	<input type="checkbox"/> Delete <b>BECK, HENRY C III 1700 PACIFIC AVENUE STE 3800 DALLAS TX</b>	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE <b>S</b>	<input type="checkbox"/> Delete <b>MCCUTHEON, LORI 1700 PACIFIC AVENUE STE 3800 DALLAS TX 75201</b>	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME		TITLE	
STREET ADDRESS		NAME	
CITY-ST-ZIP		STREET ADDRESS	
		CITY-ST-ZIP	

13. 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 11 or Block 12 if changed, or on an attachment with an address with all other like empowered.

**SIGNATURE:** *[Signature]* **Treasurer** **1-12-00** **(214) 965-1100**  
 \_\_\_\_\_  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)