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May 06 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F94000002993 (3)

1. Corporation Name

TCR SFA MIZNER, INC.

Principal Place of Business

6400 CONGRESS AVE.  
SUITE 2000  
BOCA RATON FL 33487  
02

Mailing Address

6400 CONGRESS AVE.  
SUITE 2000  
BOCA RATON FL 33487-2810  
02



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

3. Date Incorporated or Qualified

06/08/1994

3a. Date of Last Report

04/25/1996

4. FEI Number

75-2541337

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$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

FISH, DEBORAH L.  
6400 CONGRESS AVE., STE 2000  
BOCA RATON FL 33487

10. Name and Address of New Registered Agent

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

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD  
NAME WHEELER, CHRIS D  
STREET ADDRESS 6400 CONGRESS AVENUE, STE 2000  
CITY-ST-ZIP BOCA RATON FL

☐ DELETE

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

☐ DELETE

TITLE V  
NAME BREINING, CLIFFORD A  
STREET ADDRESS 8552 VIA DOS VALLES  
CITY-ST-ZIP RANCHO SANTA FE CA

☒ DELETE

TITLE VD  
NAME TERWILLIGER, J R  
STREET ADDRESS 2859 PACES FERRY ROAD, STE 1400  
CITY-ST-ZIP ATLANTA GA

☐ DELETE

TITLE VD  
NAME CROW, HARLAN R  
STREET ADDRESS 2001 ROSS AVENUE, STE 3500  
CITY-ST-ZIP DALLAS TX

☐ DELETE

TITLE V  
NAME IGLEHART, GREG W  
STREET ADDRESS 6400 CONGRESS AVENUE, STE 2000  
CITY-ST-ZIP BOCA RATON FL

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

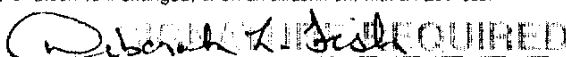
6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do 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: 

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Deborah L. Fish, Assistant Secretary

4/16/97

Date

561/997-9700

Daytime Phone #

0339101

CR2E034 (9/96)