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PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT DE STATE

Sandra B. Mortham Secretary of State 229

DIVISION OF CORPORATIONS

DOCUMENT # F94000003288 (7) 1. Corporation Name

| Principal Place of Business Mailing Address | | | | | | | hidd staid stade t | 0101 tett 1001 |
|---|--|----------------------------------|---------------------------|-------------------|--|-------------------|-----------------------------|--------------------|
| 1505 FEDERA DALLAS TX 7 | | P.O. BOX 1920 Dallas TX 75221 | | | | | | |
| US | | | | | 3. Date Incorporated or Qualified 06/22/1994 | | e of Last Rep 14/26/1995 | |
| 2. Principal Pla | ce of Business | 2a. Mailing Address | | | 4, FEI Number | | | plied For |
| 21 | | 26 | | | 75-2555533 | | | t Applicable |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | 5. Certificate of Status Desired | | \$8.75 A Fee Re | |
| City & State | | City & State | | | 6. Election Campaign Financing | | \$5.00 May Be | |
| 23 | | 28 | | | Trust Fund Contribution | | Added t | |
| Zip | Country | Zip Tari | Country | | 8. This corporation has liability for Florida Statutes Yes | intang/ble ta | ax under s 19 | 99.032, |
| 24 | 25 Solution 25 Sol | 29 1 Bagistered Apent | [30] | | 10. Name and Address of New R | | Agent | |
| | g, Italie and Address of Corte | t tregistered Agont | 81 | Name | 10. | | | |
| C T CO | RPORATION SYSTEM | | 82 | Street Add | tress (P.O. Box Number is Not Acceptab | ole; | | |
| 1200 SC | OUTH PINE ISLAND ROAD | 83 | | | | | | |
| PLANTA | TION FL 33324 | | မာ | | | | ., | |
| | | | 84 | City | | FL | 85 Zp (| Code |
| SIGNATURE _ | n, and accept the obligations of Sections and accept the obligations of Sections are dispersed and sections are dispersed and sections. | and the Eagaph who (5) | kate Frysland Agai | Segnidhide terpah | | STAC | | |
| 12. | OFFICERS AND | | 13. | т | ADDITIONS/CHANGES TO OFF | · | ~ | S IN 12 Addition |
| THILE | CD CD | DELETE | 1 1 11116 | | | ı | Change | L Addition |
| NAME | Pogue, Mack 1505 Federal Street | | 1.2 NAME 1.3 STREET | Articopage | | | | |
| STREET ADDIRESS CITY-ST-ZIP | DALLAS TX 75201 | | 14 Cily - S | · · | | | | |
| TIFLE | PD | DELETE | 2 1 TILE | ! | | | Change | Addition |
| NAME | LOFTIS, MICHAEL G | | 2.2 NAME | | | | | |
| STREET ADDRESS | 1505 FEDERAL STREET | | 23 STREFT | ADDRESS | | | | |
| CITY - ST - ZIP | DALLAS TX 75201 | | 2.4 CITY - S | | | | | |
| TITLE | VST | XX DELETE | 3 1 TITLE | | /ST | | Change | Addition |
| NAME | WALLIS, W M | | 3.2 NAME | 1 - | Nancy A. Davis | | | |
| STREET ADDRESS | 1505 FEDERAL STREET | | 33 STAEES | I | 1505 Federal Street | | | |
| CITY-ST-ZIP | DALLAS TX 75201 | [7] DELETE | 3.4 City - S 4.3 Title | I-21P 1 | Dallas, Texas 75201 | | Change | Addition |
| TIFLE | V VALCETOOTT DAVID I | L beech | 4 2 NAME | | | ' | onengo | |
| NAME STREET ADDRESS | WESTCOTT, DAVID J 1505 FEDERAL STREET | | 4.2 NAVE 4.3 STREET | ADDRESS | | | | |
| CITY-S1-ZIP | DALLAS TX 75201 | | 4.4.C/1Y - S | | | | | |
| TITLE | V | DELETE | 5 1 7:TLE | | | | Change | Addition |
| NAME | MARTIN, BARRY K | | 5.2 NAME | | | | | |
| STREET ADDRESS | 1505 FEDERAL STREET | | 5.3 \$1HEE! | ADDRESS | | | | |
| CITY - ST - ZIP | DALLAS TX 75201 | | 5.4 CI1Y - S | 1-712 | | | | |
| THILE | | ☐ DELETE | 6 1 TITLE | T I | Asst. Secretary | | Change X | Addition XX |
| NAME | | | 6.2 NAME | | Leigh Ann Everett | | | |
| STREET ADDRESS | | | 6.3 S*REET | ADORESS] | 1505 Federal Street | | | |

CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119 07(3)(k). 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 granged, or on an attachment with an address. Signature and typed on Printed Name of Signing Officer on Director

Land

Description Printed

Description Printed SIGNATURE: 🖔