

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

95 APR 28 PM 2:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F94000003849 (6)

1. Corporation Name

TBC REALTY V CORPORATION

Principal Place of Business

1401 ELM ST.
SUITE 4600
DALLAS TX 75202

Mailing Address

1401 ELM ST.
SUITE 4600
DALLAS TX 75202

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

07/22/1994

3a. Date of Last Report

4. FBI Number

APPLIED FOR

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing

Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

8. The corporation has liability for intangible tax under S. 198.032,
Florida Statutes

☐ Yes

☒ No

2. Principal Place of Business

21 1700 Pacific Ave.

2a. Mailing Address

26 1700 Pacific Ave.

Suite, Apt. #, etc.

22 Suite 3800

Suite, Apt. #, etc.

27 Suite 3800

City & State

23 Dallas, TX

City & State

28 Dallas TX

Zip

24 75201

Country

25 Dallas

Zip

29 75201

Country

30 Dallas

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION FL 33324

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 registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD
NAME	SHELBY, CHARLES P JR
STREET ADDRESS	1401 ELM ST.
CITY - ST - ZIP	DALLAS TX 75202
TITLE	V
NAME	BROOKSHIRE, STEPHEN S
STREET ADDRESS	1401 ELM ST.
CITY - ST - ZIP	DALLAS TX 75202
TITLE	VSD
NAME	RUSSELL, JAMES F
STREET ADDRESS	1401 ELM ST.
CITY - ST - ZIP	DALLAS TX 75202
TITLE	T
NAME	BOGGESE, JERRY
STREET ADDRESS	1401 ELM ST.
CITY - ST - ZIP	DALLAS TX 75202
TITLE	AS
NAME	BRAWNER, JEFFREY B
STREET ADDRESS	2311 CEDAR SPRINGS RD.
CITY - ST - ZIP	DALLAS TX 75201
TITLE	D
NAME	BECK, HENRY C III
STREET ADDRESS	1401 ELM ST.
CITY - ST - ZIP	DALLAS TX 75202

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☒ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	1700 Pacific Ave, Suite 3800
1.4 CITY - ST - ZIP	Dallas, TX 75201
2.1 TITLE	☒ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	1700 Pacific Ave, Suite 3800
2.4 CITY - ST - ZIP	Dallas, TX 75201
3.1 TITLE	☒ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	1700 Pacific Ave, Suite 3800
3.4 CITY - ST - ZIP	Dallas, TX 75201
4.1 TITLE	☒ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	1700 Pacific Ave, Suite 3800
4.4 CITY - ST - ZIP	Dallas, TX 75201
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	1700 Pacific Ave, Suite 3800
6.4 CITY - ST - ZIP	Dallas, TX 75201

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 118.07(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 this corporation or the receiver or trustee empowered to execute this report as required by Chapter 107, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report, or within attachments with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Title

Signature of Agent