

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # F94000006499 (7)

1. Corporation Name

TCR SFA BOYNTON BEACH, INC.



Principal Place of Business

6400 CONGRESS AVE
STE 2000
BOCA RATON FL 33487
US

Mailing Address

6400 CONGRESS AVE
STE 2000
BOCA RATON FL 33487
US

3. Date Incorporated or Qualified
12/20/1994

3a. Date of Last Report
03/01/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

4. FEI Number
75-2571350

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. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

~~BRYANT, BRAD A~~
6400 CONGRESS AVE., #2000
BOCA RATON FL 33487

81 Name
Deborah L. Fish
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

Deborah L. Fish

(Print or Registered Agent's name and address in State)

3/14/96
DATE

12. OFFICERS AND DIRECTORS

| TITLE | NAME | STREET ADDRESS | CITY - ST - ZIP | <input type="checkbox"/> DELETE |
|-------|----------------------|-----------------------------|---------------------|---------------------------------|
| PD | WHEELER, CHRIS D | 6400 CONGRESS AVE., #2000 | BOCA RATON FL 33487 | <input type="checkbox"/> |
| V | BRYANT, BRAD D | 6400 CONGRESS AVE., #2000 | BOCA RATON FL 33487 | <input type="checkbox"/> |
| V | MACDONALD, WILLIAM C | 6400 CONGRESS AVE., #2000 | BOCA RATON FL 33487 | <input type="checkbox"/> |
| V | IGLEHART, GREG W | 6400 CONGRESS AVE., #2000 | BOCA RATON FL 33487 | <input type="checkbox"/> |
| AS | FISH, DEBORAH L | 6400 CONGRESS AVE., #2000 | BOCA RATON FL 33487 | <input type="checkbox"/> |
| VD | TERWILLIGER, J R | 2859 PACES FERRY RD., #1400 | ATLANTA GA 30339 | <input type="checkbox"/> |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

| 1.1 TITLE | 1.2 NAME | 1.3 STREET ADDRESS | 1.4 CITY - ST - ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
|---|----------|--------------------|---------------------|---|
| 2.1 TITLE <td>2.2 NAME</td> <td>2.3 STREET ADDRESS</td> <td>2.4 CITY - ST - ZIP</td> <td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> | 2.2 NAME | 2.3 STREET ADDRESS | 2.4 CITY - ST - ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 3.1 TITLE <td>3.2 NAME</td> <td>3.3 STREET ADDRESS</td> <td>3.4 CITY - ST - ZIP</td> <td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> | 3.2 NAME | 3.3 STREET ADDRESS | 3.4 CITY - ST - ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 4.1 TITLE <td>4.2 NAME</td> <td>4.3 STREET ADDRESS</td> <td>4.4 CITY - ST - ZIP</td> <td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> | 4.2 NAME | 4.3 STREET ADDRESS | 4.4 CITY - ST - ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 5.1 TITLE <td>5.2 NAME</td> <td>5.3 STREET ADDRESS</td> <td>5.4 CITY - ST - ZIP</td> <td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> | 5.2 NAME | 5.3 STREET ADDRESS | 5.4 CITY - ST - ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 6.1 TITLE <td>6.2 NAME</td> <td>6.3 STREET ADDRESS</td> <td>6.4 CITY - ST - ZIP</td> <td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> | 6.2 NAME | 6.3 STREET ADDRESS | 6.4 CITY - ST - ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |

800001797348
-04/29/96--01016--033
***200.00

12
4.25

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 changed, or on an attachment with an address.

SIGNATURE

Deborah L. Fish
Deborah L. Fish, Assistant Secretary

3/14/96
DATE

407/997-9700
Office Phone #

CR2E034 (12/95)