

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
APR 26 PM 3:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F9400000 6511

1. Corporation Name

SFERS X Realty Corporation

Principal Place of Business

Mailing Address

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Organized

4. FEI Number

Applied For
Not Applicable

94-3214198

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 owes the current year intangible
Personal Property Tax

Yes No

9. Name and Address of New Registered Agent

2. Principal Place of Business

21. 5400 LBJ Freeway LB/2

22. Suite 700

23. City & State

24. Dallas, TX

25. Zip

75240

26. Country

USA

2a. Mailing Address

26. SAME AS 2

27. Suite, Apt. #, etc.

28. City & State

29. Zip

30. Country

9. Name and Address of Current Registered Agent

81. Name

CT Corporation System

82. Street Address (P.O. Box Number is Not Acceptable)

1200 South Pine Island Rd.

83. City

Plantation

FL

85. Zip Code

33324

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

Sign in typed or printed name of the officer or director.

(Delete) For each change, sign in typed or printed name of the officer or director.

Date

12. OFFICERS AND DIRECTORS

1. SEE EXHIBIT A ATTACHED HERETO

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

13.

11. TITLE

12. NAME

13. STREET ADDRESS

14. CITY-ST-ZIP

15. TITLE

16. NAME

17. STREET ADDRESS

18. CITY-ST-ZIP

19. TITLE

20. NAME

21. STREET ADDRESS

22. CITY-ST-ZIP

23. TITLE

24. NAME

25. STREET ADDRESS

26. CITY-ST-ZIP

27. TITLE

28. NAME

29. STREET ADDRESS

30. CITY-ST-ZIP

31. TITLE

32. NAME

33. STREET ADDRESS

34. CITY-ST-ZIP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

[Change] [Add]

500002857425-4

04/29/99-01120-001

****150.00 ****150.00

[Change] [Add]

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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, with all other like empowered.

SIGNATURE:

Ronald Ragsdale

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-21-99

972-715-7400

CR2E034 (11/98)