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

Mailing Address

P.O. BOX 819087 DALLAS TX 75381-9087

2a. Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Feb 27 1997 8:00am

Secretary of State

3a. Date of Last Report

Applied For

05/01/1996

3. Date Incorporated or Qualified

01/04/1995

4. FEI Number

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9500000025 (5)

CCA NORTHEAST, INC.

Principa! Place of Business

2. Principal Place of Business

appears in Block 12 or Block 13 if cha

SIGNATURE:

P.O. BOX 819067

DALLAS TX 75381

21			26				75-2155124	No	t Applicable	
Suite	, Apt. ≢, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 A			
22			27				U. Continuate of Clarks Desired	Fee Re	quired	
	City & State			City & State			6. Election Campaign Financing	\$5.00		
23			[28]				Trust Fund Contribution	Added to	o Fees	
Z ip		Country	Zip	•	Country	<i>f</i>	8. This corporation has liability for intangit		199.032,	
24	0 Name	25 and Address of Curren	29 Pagistered A		30		Florida Statutes Yes 10. Name and Address of New Registere	No	· - · · · · · · · · · · · · · · · · · ·	
9. Name and Address of Current Registered Agent						Name	IV. Hame and Address of New Neglisials	u Agent	***************************************	
CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324										
					82	82 Street Address (P.O. Box Number is Not Acceptable)				
					83	83				
					84	City	F	85 Zip C	Ode	
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 cl									haratainar	
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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.										
age	nt Tami Jamii ar w	ith, and accept the obliga	tions of, Section	n 607.0505, Fio	rida Statute	S.				
SIGNAT	URE Stonature was n	for printed name of registered age	or and tile if applicab	i: (NOTE	Registered Ag	ent signature regul	red when reinstating) DATE			
12.		OFFICERS AND			13.		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTOR	S IN 12	
TELE	P			DELETE	1,1 TITLE			☐ Change	Addition	
NAME	HINCKLE	Y, JAMES			1.2 NAME					
STREET ADD		FREEWAY, SUITE 70	0		1.3 STREET	ADDRESS				
C+TY - S1 - 7					1.4 CITY - S	37 - 7IP			j	
TITLE	V			DELETE	2.1 TITLE			Change	Addition	
NAME	JAHNKE,	JEFFREY			2.2 NAME					
STREET ADI		FREEWAY, SUITE 70	0		2.3 STREET	ADDRESS				
CHY-\$1-7					2. 4 CITY-	ST-ZIP				
TITLE	S			DELETE	3.1 TITLE			Change	Addition	
NAVE	TAYLOR,	TERRY			3.2 NAME					
STREET ADO	ress 3030 LBJ	FREEWAY, SUITE 70	0		3.3 STREET	ADDRESS			Ì	
CHY-ST-7	P DALLAS	TX 75234			3.4. CITY-	ST-ZIP				
TITLE				DELETE	4.1 TITLE			Change	Addition	
NAME					4. 2 NAME					
STREET ADE	DESSS				4.3 STREET	ADDRESS				
CHY-\$1-7	P				4.4 CITY - S	5T - ZiP				
TITLE		,		DELETE	5.1 TITLE			Change	Addition	
NAM:					5.2 NAME					
STREET ADO	IPESS				5.3 STREET	ADDRESS			1	
CITY - S1 - Z	t _b				5.4 CITY - 5	T- Z IP				
THLE				DELETE	6.1 TITLE			Change	Addition	
NAMÉ					6.2 NAME					
STREET ADO	DRESS				6.3 STREET	ADDRESS			1	
CITY - \$1 - Z	P				6.4 CITY-5	T-21P			i	
14. I do	hereby certify tha	t the information supplied	with this fring	does not qualify	for the exe	mption state	d in Section 119.07(3)(i), Florida Statutes. I furti	ner certify that t	he	
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										