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Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # F95000000361 (4)

1. Corporation Name  
TCR SOUTH FLORIDA HOMEBUILDING, INC.

Principal Place of Business  
6400 CONGRESS AVENUE, SUITE  
SUITE 2000  
BOCA RATON FL 33487

Mailing Address  
6400 CONGRESS AVENUE, SUITE  
SUITE 2000  
BOCA RATON FL 33487



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 01/23/1995	3a. Date of Last Report 04/25/1996
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 75-2177591	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
FISH, DEBORAH L. 6400 CONGRESS AVENUE SUITE 2000 BOCA RATON FL 33487		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 relistening)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	
NAME	WHEELER, CHRIS D	1.2 NAME	
STREET ADDRESS	6400 CONGRESS AVENUE, SUITE 2000	1.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL 33487	1.4 CITY-ST-ZIP	
TITLE	V	2.1 TITLE	
NAME	BRYANT, BRAD	2.2 NAME	
STREET ADDRESS	6400 CONGRESS AVENUE, SUITE 2000	2.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL 33487	2.4 CITY-ST-ZIP	
TITLE	AS	3.1 TITLE	
NAME	FISH, DEBORAH L	3.2 NAME	
STREET ADDRESS	6400 CONGRESS AVENUE, SUITE 2000	3.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL 33487	3.4 CITY-ST-ZIP	
TITLE	DV	4.1 TITLE	
NAME	TERWILLIGER, J. RONALD	4.2 NAME	
STREET ADDRESS	2859 PACES FERRY ROAD, SUITE 1400	4.3 STREET ADDRESS	
CITY-ST-ZIP	ATLANTA GA 30339	4.4 CITY-ST-ZIP	
TITLE	DV	5.1 TITLE	
NAME	CROW, HARLAN R	5.2 NAME	
STREET ADDRESS	2001 ROSS AVENUE, 3500 TRAMMELL CROW CENTR	5.3 STREET ADDRESS	
CITY-ST-ZIP	DALLAS TX 75201	5.4 CITY-ST-ZIP	
TITLE	VST	6.1 TITLE	
NAME	PACE, RANDY J	6.2 NAME	
STREET ADDRESS	717 N. HARWOOD, SUITE 1200	6.3 STREET ADDRESS	
CITY-ST-ZIP	DALLAS TX 75201	6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
Deborah L. Fish, Assistant Secretary

4/16/97

Date

561 1997-9700

Daytime Phone #

0622990

CR2E034 (9/96)