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May 06 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # F95000000363 (0)

1. Corporation Name
TCR SOUTH FLORIDA CONSTRUCTION COMPANY, INC.



Principal Place of Business

Mailing Address

6400 CONGRESS AVENUE, SUITE 2000
BOCA RATON FL 33487

6400 CONGRESS AVENUE, SUITE 2000
BOCA RATON FL 33487-2810

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

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, type or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PD	<input type="checkbox"/> DELETE
NAME	WHEELER, CHRIS D	
STREET ADDRESS	6400 CONGRESS AVENUE, SUITE 2000	
CITY- ST- ZIP	BOCA RATON FL 33487	
TITLE	DV	<input type="checkbox"/> DELETE
NAME	TERWILLIGER, J. RONALD	
STREET ADDRESS	2859 PACES FERRY ROAD, SUITE 1400	
CITY- ST- ZIP	ATLANTA GA 30339	
TITLE	DV	<input type="checkbox"/> DELETE
NAME	CROW, HARLAN R	
STREET ADDRESS	2001 ROSS AVENUE, 3500 TRAMMELL CROW CENTR	
CITY- ST- ZIP	DALLAS TX 75201	
TITLE	STV	<input type="checkbox"/> DELETE
NAME	PACE, RANDY J	
STREET ADDRESS	717 N. HARWOOD, SUITE 1200	
CITY- ST- ZIP	DALLAS TX 75201	
TITLE	V	<input type="checkbox"/> DELETE
NAME	BRYANT, BRAD D	
STREET ADDRESS	6400 CONGRESS AVENUE, SUITE 2000	
CITY- ST- ZIP	BOCA RATON FL 33487	
TITLE	V	<input checked="" type="checkbox"/> DELETE
NAME	DUGGAN, THOMAS	
STREET ADDRESS	6400 CONGRESS AVENUE, SUITE 2000	
CITY- ST- ZIP	BOCA RATON FL 33487	

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY- ST- ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY- ST- ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY- ST- ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY- ST- ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY- ST- ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	Iglehart, Greg
6.3 STREET ADDRESS	6400 congress Ave
6.4 CITY- ST- ZIP	Boca Raton, FL 33487

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:

Thomas Duggan
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/16/97

561/997-9700

Date

Daytime Phone #

CR2E034 (9/96)