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

**PROFIT** FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham FILED ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 98 APR 23 AM 8: 46 DOCUMENT #

1. Corporation Name F95000002449 (5) SECRETARY OF STATE TALLAHASSEE, FLORIDA TCR SFA DELRAY, INC. Mailing Address Principal Place of Business 6400 CONGRESS AVE 6400 CONGRESS AVE: DO NOT WRITE IN THIS SPACE BOOM PATON FL-83487 BOOM RATON FL-93407 3. Date Incorporated or Qualified 05/18/1995 2. Principal Place of Business 2a, Mailing Address 4. FEI Number Applied For Not Applicable 75-2595240 717 No Harwood 717 N. Humos Suite, Apl. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 1200 1200 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Zip Country Zip Country 6. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Whes \(\sigma\) No USA 75201 USA 24 75201 30 Personal Property Tax due June 30. 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered/Agent 81 Name FISH, DEBORAH L. Street Address (P.O. Box Number is Not Acceptable) 8400 CONGRESS AVE., 2000 82 Hays Stret BOOA-RATON FL 33487 83 Zip Code 84 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. Lam familiar with, and a cept the obligations of, Section 607.0505, Florida Statutes. Karen B. Rozar, As Its Agent (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. Change Addition DELETE 1.1 TITLE TITLE PD NAME WHEELER, CHRIS D 1.2 NAME Steinhandt, Shari 6400 Congress Ave, ste. 1000 STREET ADDRESS 6400 CONGRESS AVE., #2000 1.3 STREET ADDRESS Boca Raton, FL 33487 BOCA RATON FL 33487 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition 2.1 TITLE TITEE Fish Deborah 6400 Cangreso Acre, 18te 1000 NAME **IGLEHART, GREG W** 2.2 NAME STREET ADDRESS 6400 CONGRESS AVE., #2000 2.3 STREET ADDRESS **BOCA RATON FL 33487** 2. 4 CITY - ST - ZIP BOCG RAYOR, FL 33487 CITY-ST-ZIP DELETE 3.1 TITLE Change Addition TITLE Terwilliger, J.R. NAME TERWILLIGER, J R 3.2 NAME 2859 Paces Forry Rd. 4 1400 2859 PACES FERRY RD., #1400 3.3 STREET ADDRESS STREET ADDRESS ATLANTA GA 30339 3.4. CITY - ST - ZIP Atlanta, GA 30339 CITY-ST-ZIP ☐ Addition DELETE Change TITLE 4.1 TITLE NAME CROW, HARLAN R 4. 2 NAME 000002503330-- 9 STREET ADDRESS 2001 ROSS AVE., #3500 4.3 STREET ADDRESS -04/23/98--01087--001 DALLAS TX 75201 CITY-ST-ZIP 4.4 CITY - ST - ZIP \*\*\*\*<u>150,00</u>\_ DELETE TITLE VST 5.1 TITLE NAME PACE, RANDY J 5.2 NAME STREET ADDRESS 717 N. HARWOOD, #1200, LB 128 5.3 STREET ADDRESS CITY-ST-ZIP DALLAS TX 75201 5.4 CITY - ST - ZIP DELETE Change 6.1 TITLE TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 14. I 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.