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
Jan 27, 1999 8:00am
Secretary of State

01-27-1999 90022 009 ****150.00

DOCUMENT # **F96000000015**

1. Corporation Name
FREEMAN MANAGEMENT CORPORATION

Principal Place of Business
1421 WEST MOCKINGBIRD LANE
DALLAS TX 75247-4978
US

Mailing Address
1421 WEST MOCKINGBIRD LANE
DALLAS TX 75247-4978
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed: 01/02/1996

2. Principal Place of Business — 21
Suite, Apt. #, etc. — 22
City & State — 23
Zip — 24 Country — 25

2a. Mailing Address — 26
Suite, Apt. #, etc. — 27
City & State — 28
Zip — 29 Country — 30

4. FEI Number: 75-2623264 — Applied For / Not Applicable

5. Certifcate 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 Current Registered Agent
C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent
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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	DCEO	☐ DELETE
NAME	FREEMAN, DONALD S JR.	
STREET ADDRESS	1421 W MOCKINGBIRD LANE	
CITY-ST-ZIP	DALLAS TX	
TITLE	PD	☐ DELETE
NAME	VAN ORT, DALE	
STREET ADDRESS	1421 W MOCKINGBIRD LANE	
CITY-ST-ZIP	DALLAS TX	
TITLE	VD	☐ DELETE
NAME	LOZIER, ROBERT	
STREET ADDRESS	1421 MOCKINGBIRD LANE	
CITY-ST-ZIP	DALLAS TX	
TITLE	V	☐ DELETE
NAME	MOSELEY, ELLIS E	
STREET ADDRESS	1421 W MOCKINGBIRD LANE	
CITY-ST-ZIP	DALLAS TX	
TITLE	VD	☐ DELETE
NAME	KENNEDY, KEITH	
STREET ADDRESS	1421 W MOCKINGBIRD LAND	
CITY-ST-ZIP	DALLAS TX	
TITLE	AS	☐ DELETE
NAME	MCDONALD, ROBERT E	
STREET ADDRESS	1421 W MOCKINGBIRD LANE	
CITY-ST-ZIP	DALLAS TX	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		☐ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

CR2E034 (11/98)

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, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED — 12/8/98 — 2146709145
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #