

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

97 FEB 18 AM 8:39

DOCUMENT # F96000001358 (8)

1. Corporation Name
NEW TAMTRAIL CORP.

Principal Place of Business
C/O GOLDMAN, SACHS & CO.
100 CRESCENT CT., #1000
DALLAS TX 75201

Mailing Address
C/O GOLDMAN, SACHS & CO.
100 CRESCENT CT., #1000
DALLAS TX 75201-7893



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

25

2a. Mailing Address

26 600 E Las Colinas Blvd

Suite, Apt. #, etc.

27 Suite 1900

City & State

28 Irving, TX

Zip

29 75039

Country

30

3. Date Incorporated or Qualified

03/18/1996

3a. Date of Last Report

4. FEI Number

~~00000000~~ 75-2634518

Applied For

Not Applicable

5. Certificate 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 has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes ☐ No

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

100002033091
-02/21/97--01003--000
***3465.00 ***1687.00

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 fee if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME EDELMAN, MARTIN L
STREET ADDRESS 100 CRESCENT CT., #1000
CITY-ST-ZIP DALLAS TX 75201

TITLE D
NAME KATZ, RICHARD
STREET ADDRESS 100 CRESCENT CT., #1000
CITY-ST-ZIP DALLAS TX 75201

TITLE D
NAME GLADSTEIN, GARY
STREET ADDRESS 100 CRESCENT CT., #1000
CITY-ST-ZIP DALLAS TX 75201

TITLE D
NAME HAMAOTO, DAVID T
STREET ADDRESS 100 CRESCENT CT., #1000
CITY-ST-ZIP DALLAS TX 75201

TITLE D
NAME ROTHENBERG, STUART M
STREET ADDRESS 100 CRESCENT CT., #1000
CITY-ST-ZIP DALLAS TX 75201

TITLE D
NAME WILLIAMS, TODD A
STREET ADDRESS 100 CRESCENT CT., #1000
CITY-ST-ZIP DALLAS TX 75201

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P
1.2 NAME Gunn, G Douglas
1.3 STREET ADDRESS 100 Crescent Court, Suite 1000
1.4 CITY-ST-ZIP Dallas, TX 75201

2.1 TITLE T, VP
2.2 NAME Frapart, Richard R
2.3 STREET ADDRESS 600 E Las Colinas Blvd, Suite 1900
2.4 CITY-ST-ZIP Irving, TX 75039

3.1 TITLE S, VP
3.2 NAME Murphy, Ken
3.3 STREET ADDRESS 600 E Las Colinas Blvd, Suite 1900
3.4 CITY-ST-ZIP Irving, TX 75039

4.1 TITLE VP
4.2 NAME Ainsworth, Brian M
4.3 STREET ADDRESS 600 E Las Colinas Blvd, Suite 1900
4.4 CITY-ST-ZIP Irving, TX 75039

5.1 TITLE VP
5.2 NAME Lozier, James
5.3 STREET ADDRESS 600 E Las Colinas Blvd, Suite 1900
5.4 CITY-ST-ZIP Irving, TX 75039

6.1 TITLE VP
6.2 NAME Bernstein, Ronald L
6.3 STREET ADDRESS 100 Crescent Ct, Suite 1000
6.4 CITY-ST-ZIP Dallas, TX 75201

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 any attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Richard P. Frapart Vice President

Date

Daytime Phone

2/7/97

972/831-2200

11 CR2E034 (9/96)