

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 # F96000003274 (5)

1. Corporation Name  
NEW GALAHAD SOUTH CORP.



Principal Place of Business

Mailing Address

% GOLDMAN, SACHS & CO.  
100 CRESCENT COURT, SUITE 1000  
DALLAS TX 75201

% GOLDMAN, SACHS & CO.  
100 CRESCENT COURT, SUITE 1000  
DALLAS TX 75201-7893

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 600 E Las Colinas Blvd

22 City & State

27 Suite 1900

23 Zip

Country

28 Irving, TX

Zip

Country

24

25

29 75039

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

3a. Date of Last Report

06/27/1996

4. FEI Number

75-2657422

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

10. Name and Address of New Registered Agent

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

81 Name

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

83

84 City

300002093643-08  
-02/21/97--01003--001  
\*\*\*3465.00 \*\*\*165.00

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 line if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

| TITLE | NAME             | STREET ADDRESS                                             | CITY-STATE-ZIP | DELETE                   |
|-------|------------------|------------------------------------------------------------|----------------|--------------------------|
| P     | GUNN, G D        | % GOLDMAN, SACHS/ 100 CRESCENT CT #1000<br>DALLAS TX 75201 |                | <input type="checkbox"/> |
| VTAS  | FRAPART, RICHARD | % GOLDMAN, SACHS/ 100 CRESCENT CT #1000<br>DALLAS TX 75201 |                | <input type="checkbox"/> |
| V     | AINSWORTH, BRIAN | % GOLDMAN, SACHS/ 100 CRESCENT CT #1000<br>DALLAS TX 75201 |                | <input type="checkbox"/> |
| V     | CORSON, LAWRENCE | % GOLDMAN, SACHS/ 100 CRESCENT CT #1000<br>DALLAS TX 75201 |                | <input type="checkbox"/> |
| V     | GWYNN, JOHN      | % GOLDMAN, SACHS/ 100 CRESCENT CT #1000<br>DALLAS TX 75201 |                | <input type="checkbox"/> |
| SAV   | WARD, JOHN       | % GOLDMAN, SACHS/ 100 CRESCENT CT #1000<br>DALLAS TX 75201 |                | <input type="checkbox"/> |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

| 1.1 TITLE | 1.2 NAME            | 1.3 STREET ADDRESS                                     | 1.4 CITY-STATE-ZIP | Change                   | Addition                            |
|-----------|---------------------|--------------------------------------------------------|--------------------|--------------------------|-------------------------------------|
| P         | Gunn, G Douglas     | 100 Crescent Ct, Suite 1000<br>Dallas, TX 75201        |                    | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 2.1 TITLE | 2.2 NAME            | 2.3 STREET ADDRESS                                     | 2.4 CITY-STATE-ZIP | Change <td>Addition</td> | Addition                            |
| T, VP     | Frapart, Richard R  | 600 E Las Colinas Blvd, Suite 1900<br>Irving, TX 75039 |                    | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| S, VP     | Murphy, Ken         | 600 E Las Colinas Blvd, Suite 1900<br>Irving, TX 75039 |                    | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 4.1 TITLE | 4.2 NAME            | 4.3 STREET ADDRESS                                     | 4.4 CITY-STATE-ZIP | Change <td>Addition</td> | Addition                            |
| VP        | Ainsworth, Brian M  | 600 E Las Colinas Blvd, Suite 1900<br>Irving, TX 75039 |                    | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 5.1 TITLE | 5.2 NAME            | 5.3 STREET ADDRESS                                     | 5.4 CITY-STATE-ZIP | Change <td>Addition</td> | Addition                            |
| VP        | Lozier, James       | 600 E Las Colinas Blvd, Suite 1900<br>Irving, TX 75039 |                    | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 6.1 TITLE | 6.2 NAME            | 6.3 STREET ADDRESS                                     | 6.4 CITY-STATE-ZIP | Change <td>Addition</td> | Addition                            |
| VP        | Bernstein, Ronald L | 100 Crescent Ct, Suite 1000<br>Dallas, TX 75201        |                    | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(n), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
Richard R Frapart, Vice President

2/7/97 972/831-2200

Daytime Phone #

0494404

CR2E034 (9/96)