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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1	MENT # F96000 o ix of texas, inc.	000417	74 (6)	•				
Principal Plac	Mailing Ad	Mailing Address				ist minne tines tanti da	At LAST	
6400 MPERIA	AL DRIVE	6400 IMP8	6400 IMPERIAL DRIVE					
PO BOX 8216 WACO TX 76712-6216			PO BOX 8216 WACO TX 76712-8216			DO NOT WRITE IN THIS	CDACE	
WACO IX 78	1/12-6216	WACU IX	76/12-6216			3. Date Incorporated or Qualified	SPACE	
						08/15/1996		
2. Principal P	lace of Business	2a. Mailing	2a. Mailing Address			4. FEI Number	Applie	ed For
21		26	26			74-2690681		pplicable
Suite, Apt.	#, etc.	Suite, A	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Add	
22		27				o, definibate of states besired	Fee Requi	
City & Stat	Ө	<u> </u>	City & State			6. Election Campaign Financing	\$5.00 ма	
23 Zip	Country	28 Zip		Countr		Trust Fund Contribution	Added to F	
24	25 Country	29		30	У	 This corporation owes or has paid the cu Personal Property Tax due June 30. 	rrent year Intang □ Yes □ N	
24	9. Name and Address of Current			301		10. Name and Address of New Registered		" {
C.	T CORPORATION SYSTEM			81	Name			
1200 SOUTH PINE ISLAND ROAD				82	Stroot A	ddress (P.O. Box Number is Not Acceptable)		
PLANTATION FL 33324				0.	OU COL A	doress (F.O. Box Number is Not Acceptable)		
				83				
				84	City		85 Zip Cod	
				1	Í	FL	• I_L	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above office or registered agent, or both, in the State of Florida. Such change was authorized by						corporation submits this statement for the purpose of	of changing its re	gistered
agent. I a	m familiar with, and accept the obligation	tions of, Section	607.05 0 5, Fto	rida Statute)\$.	statistic dealer of emedicies. Thoropy accept the up	oomanoni do rog	1010100
SIGNATURE								
12.	Signature, typed or printed name of registered agent OFFICERS AND		e (NOTE	13.	ent signature re	equired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN	J 12
TITLE	PC-Director Chai		DELETE	1.1 TITLE		ADDITIONO/OTIANGEO TO OTT IGENO AN		Addition
NAME	HAWKINS, JAMES R	1 1 800 6 1	_	1.2 NAME	1			-
STREET ADDRESS	6400 IMPERIAL DRIVE			1.3 STREE	I ADDRESS			
CITY-ST-ZIP	WACO TX 76712-8216			1.4 CiTY-:	ST-ZIP			Ì
TITLE	00-Pres.1Director		DELETE	2.1 TITLE			Change _	Addition
NAME	S ARTAIN, JAMES T	-		2.2 NAME				
STREET ADDRESS	6400 IMPERIAL DRIVE			2.3 STREE	T ADDRESS			
CITY-ST-ZIP	WACO TX 76712-8216			2. 4 CITY-	ST-ZIP			1
THLE	EVD		DELETE	3.1 TITLE	- 1		Change	Addition [
NAME	HAGELSTEIN, RICK R 6400 IMPERIAL DRIVE			3 2 NAME				}
STREET ADDRESS	WACO TX 76712-8216				T ADDRESS			İ
CATY-ST-ZIP TITLE	8		DELETE	3.4. CITY - 4.1 TITLE	21-ZII,		Change	Addition
NAME	RAY, MARGIE		- Pricit	4. 2 NAME				, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
STREET ADORESS	6400 IMPERIAL DRIVE			1	T ADDRESS			1
CITY-ST-ZIP	WACO TX 76712-8216			4.4 CITY-1				-
TITLE	SVT		DELETE	5.1 TITLE	-		Change	Addition
NAME	MCNAIR, KATHY S			5.2 NAME	}			j
STREET ADDRESS	6400 IMPERIAL DRIVE			5.3 STREE	T ADDRESS			
CITY-ST-ZIP	WACO TX 76712-8216			5.4 City-s	ST - ZIP			[
TITLE	D		DELETE	6.1 TITLE			Change	Addition
NAME	PARKER, JEFFREY			6.2 NAME				
STREET ADDRESS	600 CLEARWATER DRIVE			6.3 STREET	ADDRESS			

14. I hereby certify that the information supplied with this filling 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.

6.4 CITY - S1 - ZIP

MINNETONKA MN 55343

1112108

FILED

Jan 27 1998 8:00am

Secretary of State