

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # F97000001724**

1. Entity Name

TCR CONSTRUCTION I, INC.**FILED****May 05, 2001 8:00 am**
Secretary of State

05-05-2001 91095 024 ***150.00

Principal Place of Business

**201 N NEW YORK AVE
STE 200
WINTER PARK FL 32789
US**

Mailing Address

**201 N NEW YORK AVE
STE 200
WINTER PARK FL 32789
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **75-2698901**Applied For
Not Applicable5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525**

Name

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

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so. ☐
(See criteria on back)**FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State**10. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
P	HOEKSEMA, DOUGLAS A	201 N NEW YORK AVE., STE 200	WINTER PARK FL 32789	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
VD	CROW, HARLAN R	2001 ROSS AVENUE, STE 3200	DALLAS TX	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
VS	PATTERSON, THOMAS J	717 N. HARWOOD, STE 1200, LB128	DALLAS TX	<input type="checkbox"/>					<input checked="" type="checkbox"/>	<input type="checkbox"/>
VD	TERWILLIGER, J R	2859 PACES FERRY RD., STE 1400	ATLANTA GA	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
AS	ZANOWICK, JOAN C	207 N NEW YORK AVE, STE 200	WINTER PARK FL 32789	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
VT	COLLINS, MICHAEL	1810 GATEWAY DR., STE 100	SAN MATEO CA 94404	<input checked="" type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)