

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000006449

FILED
Mar 07, 2006
Secretary of State

Entity Name: TCR NF PROPERTIES, INC.

Current Principal Place of Business:

495 N KELLER ROAD
MAITLAND, FL 32751 US

New Principal Place of Business:

Current Mailing Address:

6400 CONGRESS AVE
STE 2100
BOCA RATON, FL 33487 US

New Mailing Address:

FEI Number: 75-2723022 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MCGWIER, MICHAEL
Address: 2859 PACES FERRY RD STE 1100
City-St-Zip: ATLANTA, GA 30339

Title: VD () Delete
Name: TERWILLIGER, J R
Address: 2859 PACES FERRY RD., STE 1100
City-St-Zip: ATLANTA, GA 30339

Title: VD () Delete
Name: CROW, HARLAN R
Address: 2100 MCKINNEY AVE., STE. 700
City-St-Zip: DALLAS, TX 75201

Title: VST () Delete
Name: PATTERSON, THOMAS J
Address: 2100 BRYAN ST. 3700
City-St-Zip: DALLAS, TX

Title: AS () Delete
Name: STEINHARDT, SHARI
Address: 6400 CONGRESS AVE STE 2100
City-St-Zip: BOCA RATON, FL 33487

Title: V () Delete
Name: KOLAR, ALAN
Address: 495 N KELLER RD
City-St-Zip: MAITLAND, FL 32751

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SHARI STEINHARDT

AS

03/07/2006

Electronic Signature of Signing Officer or Director

Date