

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000000457

FILED  
Mar 29, 2007  
Secretary of State

Entity Name: TCR SF PROPERTIES, INC.

**Current Principal Place of Business:**

495 N KELLER RD  
MAITLAND, FL 32751

**New Principal Place of Business:**

**Current Mailing Address:**

6400 CONGRESS AVE  
STE 2100  
BOCA RATON, FL 33487

**New Mailing Address:**

FEI Number: 20-0326198      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: VD ( ) Delete  
Name: CROW, HARLAN R  
Address: 2100 MCKINNEY AVE SUITE 700  
City-St-Zip: DALLAS, TX

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

Title: VST ( ) Delete  
Name: PATTERSON, THOMAS J  
Address: 2001 BRYAN STREET SUITE 3700  
City-St-Zip: DALLAS, TX

Title: PP ( ) Delete  
Name: MCDONALD, BILL  
Address: 6110 EXECUTIVE BLVD STE 315  
City-St-Zip: ROCKVILLE, MD 20852

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

**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:

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: HARLAN CROW

VD

03/29/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date