

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 23, 1999 8:00 am
Secretary of State

04-23-1999 90111 050 ***150.00

DOCUMENT # F98000000654

1. Corporation Name

WALDEN BOND GP, INC.

Principal Place of Business

5400 LBJ FREEWAY, STE 400
DALLAS TX 75240

Mailing Address

5400 LBJ FREEWAY, STE 400
DALLAS TX 75240



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/03/1998

4. FEI Number

APPLIED FOR

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 owes the current year Intangible

Personal Property Tax.

☐ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

2. Principal Place of Business

5080 Spectrum Dr.

Suite, Apt. #, etc.

Ste. 1000 East

City & State

Addison, Texas

Zip Country

75001

25 USA

2a. Mailing Address

26 5080 Spectrum Dr.

Suite, Apt. #, etc.

27 Ste. 1000 East

City & State

28 Addison, Texas 75001

Zip Country

29 75001 30 USA

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

STREET ADDRESS EDWARDS, MARSHALL B
5400 LBJ FRWY., STE 400
DALLAS TX

TITLE VTD ☐ DELETE

STREET ADDRESS DILLINGER, MARK S
5400 LBJ FRWY., STE 400
DALLAS TX

TITLE S ☐ DELETE

STREET ADDRESS HATZENBUEHLER, EDWARD H
5400 LBJ FRWY., STE 400
DALLAS TX

TITLE ☐ DELETE

STREET ADDRESS ☐ DELETE

TITLE ☐ DELETE

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STREET ADDRESS ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME
1.3 STREET ADDRESS 5080 Spectrum Dr. Ste 1000 East
1.4 CITY-ST-ZIP Addison, Texas 75001

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS 5080 Spectrum Dr. Ste 1000 East
2.4 CITY-ST-ZIP Addison, Texas 75001

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS 5080 Spectrum Dr. Ste 1000 East
3.4 CITY-ST-ZIP Addison, Texas 75001

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Mark S. Dillinger

4-13-99

Date

972-788-0510

Daytime Phone #

CR2E034 (11/98)