

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 23, 2001 8:00 am**  
**Secretary of State**

05-23-2001 91157 034 \*\*\*150.00

DOCUMENT # F98000003808

1. Entity Name

TCR DEVELOPMENT BV PLACE INC

553667

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

75-2770677

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
 Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY  
 1201 HAYS STREET  
 TALLAHASSEE FL 32301-2525

7. Name and Address of New Registered Agent

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

(If: 8. Registered Agent signature required when reappointing)

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 DV ☐ Delete  
 NAME TERWILLIGER, J. RONALD  
 STREET ADDRESS 2859 PACES FERRY RD., STE. 1400  
 CITY-STATE-ZIP ATLANTA GA 30339

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-STATE-ZIP

TITLE DV ☐ Delete  
 NAME CROW, HARLAN R  
 STREET ADDRESS 2001 ROSS AVE., STE. 3200  
 CITY-STATE-ZIP DALLAS TX 75201

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-STATE-ZIP

TITLE PD ☐ Delete  
 NAME HOEKSEMA, DOUGLAS A  
 STREET ADDRESS 201 N. NEW YORK AVE #200  
 CITY-STATE-ZIP WINTER PARK FL 32789

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-STATE-ZIP

TITLE VST ☐ Delete  
 NAME PATTERSON, THOMAS J  
 STREET ADDRESS 717 N. HARWOOD # 1200  
 CITY-STATE-ZIP DALLAS TX 75201

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-STATE-ZIP

TITLE AS ☐ Delete  
 NAME ZANOWICK, JOAN C  
 STREET ADDRESS 201 N. NEW YORK AVE #200  
 CITY-STATE-ZIP WINTER PARK FL 32789

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-STATE-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-STATE-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-STATE-ZIP

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 empowerments.

SIGNATURE:

*Joan C Zanowick AS* *Joan C Zanowick* 4/23/01

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

DEPARTMENT OF STATE