

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Mar 19, 2002 8:00 am**  
**Secretary of State**

03-19-2002 90031 045 \*\*\*150.00

**DOCUMENT #** F98000003808

**1. Entity Name**

TCR DEVELOPMENT BV PLACE, INC.

**DO NOT WRITE IN THIS SPACE**

**2. Principal Place of Business**  
201 N. New York Ave

**3. Mailing Address**  
201 N. New York Ave.

Suite, Apt. #, etc.  
**Suite 200**

Suite, Apt. #, etc.  
**Suite 200**

**City & State**  
Winter Park, FL

**City & State**  
Winter Park, FL

**4. FEI Number**  
75-2770677

**Applied For**  
☐ **Not Applicable**

**Zip**  
32789

**Country**  
USA

**Zip**  
32789

**Country**  
USA

**5. Certificate of Status Desired** ☐

**\$8.75 Additional  
Fee Required**

DO NOT WRITE IN THIS SPACE

425204

**DO NOT WRITE  
IN THIS SPACE**

**7. Name and Address of Current Registered Agent**

**Name**  
Corporation Service Company

**Street Address (P.O. Box Number is Not Acceptable)**  
~~1201 Hays Street~~

**City** Tallahassee **FL** **Zip Code** 32301

**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)

**January 1 - May 1 Fee is \$150.00  
After May 1, Fee is \$550.00  
Amended UBR is \$61.25  
Make Check Payable to Department of State**

**10. Election Campaign Financing** ☐ **\$5.00 May Be  
Trust Fund Contribution. Added to Fees**

**11. OFFICERS AND DIRECTORS**

**TITLE** DV  
**NAME** J. Ronald Terwilliger  
**STREET ADDRESS** 2859 Paces Ferry Rd., Suite 1100  
**CITY-ST-ZIP** Atlanta, GA 30339

**TITLE** VD  
**NAME** Harlan R. Crow  
**STREET ADDRESS** 2100 McKinney Ave., Suite 700  
**CITY-ST-ZIP** Dallas, TX 75201

**TITLE** PD  
**NAME** Douglas Hoeksema  
**STREET ADDRESS** 201 N. New York Ave., Ste. 200  
**CITY-ST-ZIP** Winter Park, FL 32789

**TITLE** VST  
**NAME** Thomas J. Patterson  
**STREET ADDRESS** 2001 Bryan Street Suite 3700  
**CITY-ST-ZIP** Dallas, TX 75201

**TITLE** AS  
**NAME** Joan Zanowick  
**STREET ADDRESS** 201 N. New York Ave., Suite 200  
**CITY-ST-ZIP** Winter Park, FL 32789

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**CITY-ST-ZIP**

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IN THIS SPACE**

**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 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 #

CR2E034B (12/01)