

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 12, 2002 8:00 am
Secretary of State

03-12-2002 91008 030 ***150.00

039327
AV

DOCUMENT # F98000004773

1. Entity Name

TCR FORT CLARKE I, INC.

Principal Place of Business

201 N NEW YORK AVE
STE 200
WINTER PARK FL 32789

Mailing Address

201 N NEW YORK AVE
STE 200
WINTER PARK FL 32789

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number

75-2777615

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.

(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) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 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

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

TITLE NAME ☐ Delete
 STREET ADDRESS
 CITY-ST-ZIP
 DP HOEKSEMA, DOUGLAS A
 201 N NEW YORK AVE STE 200
 WINTER PARK FL 32789

TITLE NAME ☐ Delete
 STREET ADDRESS
 CITY-ST-ZIP
 DV TERWILLIGER, J. RONALD
 2859 PACES FERRY ROAD, #1400
 ATLANTA GA 30339

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

TITLE NAME ☐ Delete
 STREET ADDRESS
 CITY-ST-ZIP
 VST PATTERSON, THOMAS J
 717 N HARWOOD #1200 LB128
 DALLAS TX 75201

TITLE NAME ☐ Delete
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME ☒ Change ☐ Addition
 STREET ADDRESS
 CITY-ST-ZIP
 2100 McKinney Ave. #700

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

TITLE NAME ☒ Change ☐ Addition
 STREET ADDRESS
 CITY-ST-ZIP
 Suite 1100

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

TITLE NAME ☒ Change ☐ Addition
 STREET ADDRESS
 CITY-ST-ZIP
 2001 Bryan Street #3700

TITLE NAME ☐ Change ☐ Addition
 STREET ADDRESS
 CITY-ST-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 empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)