

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 28, 2005 8:00 am
Secretary of State

03-28-2005 90076 006 ***150.00

DOCUMENT # F99000001532

1. Entity Name
TCR CENTER, INC.



Principal Place of Business

201 N. NEW YORK AVE
STE 200
WINTER PARK, FL 32789

Mailing Address

6400 CONGRESS AVE
STE 2100
BOCA RATON, FL 33487

50031295



2. Principal Place of Business

495 N. Keller Rd.

3. Mailing Address

Suite, Apt. #, etc.

02102005 Chg-P CR2E034 (10/03)

City & State

Maitland, FL

City & State

4. FEI Number

75-2810289

Applied For

Not Applicable

Zip
32751

Country
USA

Zip

Country

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE DV
NAME CROW, HARLAN R
STREET ADDRESS 2100 MCKINNEY AVE #700
CITY-ST-ZIP DALLAS, TX 75201 ☐ Delete

TITLE PD
NAME MCGUIER, MICHAEL
STREET ADDRESS 2859 PACOS FERRY RD STE 1100
CITY-ST-ZIP ATLANTA, GA 30339 ☐ Delete

TITLE VST
NAME PATTERSON, THOMAS J
STREET ADDRESS 2001 BRYAN STREET #3700
CITY-ST-ZIP DALLAS, TX 75201 ☐ Delete

TITLE V
NAME KOLAR, ALAN
STREET ADDRESS 201 N NEW YORK AVE STE 2100
CITY-ST-ZIP WINTER PARK, FL 32789 ☐ Delete

TITLE AS
NAME STEINARDT, SHARI
STREET ADDRESS 6400 CONGRESS AVE STE 2100
CITY-ST-ZIP BOCA RATON, FL 33487 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

TITLE V
NAME Kolar, Alan
STREET ADDRESS 495 N. Keller Rd
CITY-ST-ZIP Maitland, FL 32751 ☒ Change ☐ Addition

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

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

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Alan Kolar

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2. 14.05

Date

561-998-4451

Daytime Phone #