## 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

## DOCUMENT # **G29953**

1. Corporation Name

HINES FLORIDA CLUB CORP.

## Apr 30, 1999 8:00 am Secretary of State

04-30-1999 90109 035 \*\*\*150.00



Principal Place of Business Mailing Address				<del></del>		B 1767 BIBN BEBR BIBN BEBR BE	fill dibtt innt
•	( BLVD STE 5000	2800 POST OAK BLVD STE 5000 HOUSTON TX 77056-3110		DO NOT WRITE	E IN THIS SPACE		
						IN THIS SPACE	
					3. Date Incorporated or Qualifed 03/16/1983		
2. Principal Pl	ace of Business	2a. Mailing Address	1 9	+me-	4. FEI Number	Apr	plied For
21	AS Above	26	A. Ac	Aba	7 <del>6-</del> 0092561	<del></del> _	t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	-		5. Certifcate of Status Desired	\$8.75 A	
City & State	9	City & State			6. Election Campaign Financing	_ \$5.00 ·	May Be
23		28			Trust Fund Contribution	Added to	, ,
Zip	Country	Zip	Country		8. This corporation owes the curren		
24	25	29 3	0		Personal Property Tax.		□No
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Re	gistered Agent	
81 Name					NIA		
HOWE, OSMOND C. JR.  82 Street Addre					dress (P.O. Box Number is Not Acceptab	ile)	
200 S. BISCAYNE BLVD. SOUTHEAST FINANCIAL CENTER, SUITE 4500 83							
MIAMI FL 33131							15.
1410-214	M 1 L 30131		84	City		FL 85 Zip C	code '
44 Day and the servicine of Costines CO7 DECC and SO7 1500 Elegida Statutes the phayengment CO0					noration submits this statement for the p	surpose of changing its	registered
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.							
agent. I ai	m familiar with, and accept the obligation	ons of, Section 607.0505, Florid	ta Statutes	۸			
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: R	Registered Agent	signature requir	red when reinstating)	DATE	
12,	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTO	RS IN 12
TITLE	D	☐ DELETE	1.1 TITLE	٦	President	☐ Change	Addition
NAME	HINES, GERALD D.	~	1.2 NAME	1		• •	. \
STREET ADDRESS	2800 POST OAK BLVD. STE 500	<b>)</b> 0	1.3 STREET	ADORESS			
CITY-ST-ZIP	HOUSTON TX 77056		1.4 CITY-ST				
TITLE	PD		2.1 TITLE	V	MS COLL	☐ Change	Addition
NAME	SHANNAHAN, C K		2.2 NAME	9	EAMINE E. HUTCHEN	SIE KAND	
STREET ADDRESS	2800 POST OAK BLVD, SUITE 5	i000	2.3 STREET	ADDRESS 3	eamine E. Hutchen 1800 Post OAK Blud Houston, Texas	,216,000-	
CITY-ST-ZIP	HOUSTON TX 77056		2.4 CITY-ST	r-ZIP	Houston, lexas	שבטויוי נ	C Addition
TILE	VD	DELETE	3.1 TITLE			Change	Addition Addition
NAME	BAKER, ALAN		32 NAME				
STREET ADDRESS	2800 POST OAK BLVD, SUITE 5	000	3.3 STREET				
CITY-ST-ZIP	HOUSTON TX 77056		3.4. CITY-ST	r-ZIP		☐ Change	☐ Addition
TITLE	ST	☐ DELETE	4.1 TITLE			□ Change	
NAME	HARDIN, K.M.		4, 2 NAME				
STREET ADDRESS		000	4.3 STREET				Ì
CITY-ST-ZIP	HOUSTON TX 77056	DELETE	4.4 CITY-ST 5.1 TITLE	-ZIP		[ ] Change	Addition
TITLE	VP	T DELETE	5.1 HILE 5.2 NAME				
NAME DESCRIPTION	VOYLES, ROBERT C	000	5.3 STREET	ADDRESS I			
STREET ADDRESS	2800 POST OAK BLVD SUITE 50	JUU	5.4 CITY-ST				
CITY-ST-ZIP	HOUSTON TX 77056	☐ DELETE	6.1 TTLE		KE PRESIDENT	Change	Addition
NAME	AS KRIST, CYNTHIA A		6.2 NAME	}	, 100000001		•
STREET ARCRESS	NUST, CINTER A	nnn — <del></del>	6.3 STREET	ADDRESS			

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.

6.4 CITY-ST-ZIP

CITY-ST-ZIP

**HOUSTON TX 77056** 

F SIGNING OFFICER OR DIRECTOR