


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Mar 10 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # H45663 (2) 710
1. Corporation Name LS-16 CORPORATION JAN 20 1998 7047



Principal Place of Business C/O FDIC 1201 W. PEACHTREE ST., NE, STE. 1800 ATLANTA GA 30309 US	Mailing Address C/O FDIC 1201 W. PEACHTREE ST., NE, STE. 1800 ATLANTA GA 30309 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 03/06/1985	
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.	4. FEI Number 59-2627871		Applied For Not Applicable	
22. City & State	27. City & State	5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required			
23. Zip	28. Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees			
24. Country	25. Country	30. Country		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	
9. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324				10. Name and Address of New Registered Agent	
				81. Name	
				82. Street Address (P.O. Box Number is Not Acceptable)	
				83.	
				84. City	
				85. Zip Code FL	

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP <input checked="" type="checkbox"/> DELETE	1.1 TITLE	DP <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	RAY, PATRICIA J	1.2 NAME	HAMMETT, JAMES
STREET ADDRESS	1201 W. PEACHTREE ST., NE, STE. 1800	1.3 STREET ADDRESS	1910 PACIFIC AVENUE, 16th FLOOR
CITY-ST-ZIP	ATLANTA GA	1.4 CITY-ST-ZIP	DALLAS, TX 75201
TITLE	DVPA <input checked="" type="checkbox"/> DELETE	2.1 TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	FARRELL, CHARLES P	2.2 NAME	BELL, DANIEL M.
STREET ADDRESS	1201 W. PEACHTREE ST., NE, STE. 1800	2.3 STREET ADDRESS	1910 PACIFIC AVENUE, 16th FLOOR
CITY-ST-ZIP	ATLANTA GA	2.4 CITY-ST-ZIP	DALLAS, TX 75201
TITLE	STD <input checked="" type="checkbox"/> DELETE	3.1 TITLE	DVP <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ROSSETTI, JOHN P	3.2 NAME	SCHUG, JOHN
STREET ADDRESS	1201 W. PEACHTREE ST., NE, STE. 1800	3.3 STREET ADDRESS	1910 PACIFIC AVENUE, 16th FLOOR
CITY-ST-ZIP	ATLANTA GA	3.4 CITY-ST-ZIP	DALLAS, TX 75201
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	VP <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		4.2 NAME	KELLEY, SHARON
STREET ADDRESS		4.3 STREET ADDRESS	1910 PACIFIC AVENUE, 16th FLOOR
CITY-ST-ZIP		4.4 CITY-ST-ZIP	DALLAS, TX 75201
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	VP <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		5.2 NAME	APPLEBY, NANCY
STREET ADDRESS		5.3 STREET ADDRESS	1910 PACIFIC AVENUE, 16th FLOOR
CITY-ST-ZIP		5.4 CITY-ST-ZIP	DALLAS, TX 75201
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	VP <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		6.2 NAME	VORDTRIEDE, JOHN
STREET ADDRESS		6.3 STREET ADDRESS	1910 PACIFIC AVENUE, 16th FLOOR
CITY-ST-ZIP		6.4 CITY-ST-ZIP	DALLAS, TX 75201

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 that of the 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.

SIGNATURE

2/11/98 10:22 2-1-98

CR2E034 (10/97)

OFFICERS AND DIRECTORS (ADDITIONS)

CORPORATION NAME: LS-16 CORPORATION

TITLE:	ST
NAME:	FISHER, JOHN H.
STREET ADDRESS:	1910 PACIFIC AVENUE, 16 TH FLOOR
CITY, ST, ZIP:	DALLAS, TX 75201