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Mar 14 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H87538 (5)

1. Corporation Name
FLORIDA MALL FOOTACTION, INC.

Principal Place of Business	Mailing Address
67 MILLBROOK ST. WORCESTER MA 01606	67 MILLBROOK ST. WORCESTER MA 01606-2617

3. Date Incorporated or Qualified: 12/02/1985
3a. Date of Last Report: 05/01/1996

2. Principal Place of Business
21 Suite, Apt. #, etc.: ORANGE BLOSSOM
22 City & State: SAND LAKE ROAD
23 City & State: ORLANDO, FL
24 Zip: 32809
25 Country: USA

2a. Mailing Address
26 Suite, Apt. #, etc: 7880 BENT BRANCH DR.
27 City & State: #100
28 City & State: IRVING, TX
29 Zip: 75063
30 Country: USA

4. FEI Number: 04-2902465 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

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

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

UNITED STATES CORPORATION COMPANY
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City: FL 85 Zip Code

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	☐ DELETE	1.1 TITLE	DP	☒ Change ☐ Addition
NAME	~~MCVEY, LARRY A.~~		1.2 NAME	RALPH T. PARKS	
STREET ADDRESS	~~67 MILLBROOK STREET~~		1.3 STREET ADDRESS	7880 BENT BRANCH DR. #100	
CITY-ST-ZIP	~~WORCESTER MA~~		1.4 CITY-ST-ZIP	IRVING, TX 75063	
TITLE	VD	☒ DELETE	2.1 TITLE	VP/D	☐ Change ☒ Addition
NAME	~~WOZNIAK, EDWARD S.~~		2.2 NAME	CHARLES M. ALBERT	
STREET ADDRESS	~~67 MILLBROOK STREET~~		2.3 STREET ADDRESS	7880 BENT BRANCH DR #100	
CITY-ST-ZIP	~~WORCESTER MA~~		2.4 CITY-ST-ZIP	IRVING, TX 75063	
TITLE	AS	☒ DELETE	3.1 TITLE	VP/T	☐ Change ☒ Addition
NAME	~~LARENCE, ROGER~~		3.2 NAME	HOMER W. GREER	
STREET ADDRESS	~~67 MILLBROOK ST.~~		3.3 STREET ADDRESS	7880 BENT BRANCH DR #100	
CITY-ST-ZIP	~~WORCESTER MA~~		3.4 CITY-ST-ZIP	IRVING, TX 75063	
TITLE	TV	☒ DELETE	4.1 TITLE	VP/S	☐ Change ☒ Addition
NAME	~~WOZNIAK, EDWARD S.~~		4.2 NAME	MARK W. MAYER	
STREET ADDRESS	~~67 MILLBROOK ST.~~		4.3 STREET ADDRESS	7880 BENT BRANCH DR. #100	
CITY-ST-ZIP	~~WORCESTER MA~~		4.4 CITY-ST-ZIP	IRVING, TX 75063	
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E034 (9/96)

14. I do 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.

SIGNATURE: [illegible] 3-4-97 813-[illegible]