

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

FILED
Apr 29, 1999 8:00 am
Secretary of State

04-29-1999 90284 032 ***150.00

DOCUMENT # J36280 ✓

1. Corporation Name

Enclave Resort, Inc.

Principal Place of Business

3710 Rawlins, Suite 1500
Dallas, TX 75219

Mailing Address

3710 Rawlins, Suite 1500
Dallas, TX 75219

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/03/1986

4. FEI Number

59-2767173

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 owes the current year intangible
Personal Property Tax.

☒ Yes

☐ No

2. Principal Place of Business

21 3710 Rawlins

Suite, Apt. #, etc.

22 Suite 1500

City & State

23 Dallas Texas

Zip

24 75219

Country

25 USA

2a. Mailing Address

26 3710 Rawlins

Suite, Apt. #, etc.

27 Suite 1500

City & State

28 Dallas, Texas

Zip

29 75219

Country

30 USA

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

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

TITLE ☐ DELETE

NAME P.D.
Kenneth F. Mason
STREET ADDRESS 3710 Rawlins, Suite 1500
CITY-ST-ZIP Dallas TX 75219

TITLE ☐ DELETE

NAME C.D.
Eric P. Evans
STREET ADDRESS 3710 Rawlins, Suite 1500
CITY-ST-ZIP Dallas TX 75219

TITLE ☐ DELETE

NAME V.S.
Melvin J. Melle
STREET ADDRESS 3710 Rawlins, Suite 1500
CITY-ST-ZIP Dallas TX 75219

TITLE ☐ DELETE

NAME T.
Joseph T. Koenig
STREET ADDRESS 3710 Rawlins, Suite 1500
CITY-ST-ZIP Dallas TX 75219

TITLE ☐ DELETE

NAME V.
Lon McCray
STREET ADDRESS 3710 Rawlins, Suite 1500
CITY-ST-ZIP Dallas TX 75219

TITLE ☐ DELETE

NAME V.
Cheri L. Yates
STREET ADDRESS 3710 Rawlins, Suite 1500
CITY-ST-ZIP Dallas TX 75219

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/23/99

(214) 528-5588

CR2E034 (11/98)