

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# M97000000294

FILED  
Apr 08, 2002 8:00 AM  
Secretary of State

Entity Name: FCH/DT LEASING II, L.L.C.

## Current Principal Place of Business:

545 EAST JOHN CARPENTER FREEWAY, STE. 1300  
IRVING, TX 75062

## New Principal Place of Business:

## Current Mailing Address:

545 EAST JOHN CARPENTER FREEWAY, STE. 1300  
IRVING, TX 75062

## New Mailing Address:

FEI Number: 75-2709533

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

## Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MEMBERS:

Title: MGR ( ) Delete  
Name: COCORAN, THOMAS J JR.  
Address: 545 EAST JOHN CARPENTER FREEWAY, STE. 1300  
City-St-Zip: IRVING, TX 75062

Title: MGR ( ) Delete  
Name: ROBINSON, LAWRENCE D  
Address: 545 EAST JOHN CARPENTER FREEWAY, STE. 1300  
City-St-Zip: IRVING, TX 75062

Title: MGR ( ) Delete  
Name: WIESE, THOMAS L  
Address: 545 EAST JOHN CARPENTER FREEWAY, STE. 1300  
City-St-Zip: IRVING, TX 75062

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: CORCORAN, THOMAS J JR.  
Address: 545 EAST JOHN CARPENTER FREEWAY, STE. 1300  
City-St-Zip: IRVING, TX 75062

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: LAWRENCE D. ROBINSON

MGR

04/08/2002

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date