

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

855


**FILED**  
**Jan 28, 2003 8:00 am**  
**Secretary of State**

01-28-2003 90077 038 \*\*\*150.00

30011062



☒ CHECK HERE IF MAKING CHANGES

<b>DOCUMENT #</b> P01000111141	
<b>1. Entity Name</b> TREASURE COAST MALL FOOTACTION, INC.	

<b>Principal Place of Business</b> 3174 NW FEDERAL HWY JENSEN BEACH FL 34957	<b>Mailing Address</b> <del>7880 BENT BRANCH DR</del> <del>160</del> <del>IRVING TX 75063</del>
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<b>2. Principal Place of Business</b>	<b>3. Mailing Address</b> P.O. Box 141269
Suite, Apt. #, etc.	Suite, Apt. #, etc.

<b>City &amp; State</b>	<b>City &amp; State</b> IRVING, TX
<b>Zip</b>	<b>Zip</b> 75014-1269
<b>Country</b>	<b>Country</b>

<b>4. FEI Number</b> 65-1156371	<b>Applied For</b> <input type="checkbox"/> Not Applicable
<b>5. Certificate of Status Desired</b> <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

<b>6. Name and Address of Current Registered Agent</b>  CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301-2525
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<b>7. Name and Address of New Registered Agent</b>
Name
Street Address (P.O. Box Number is Not Acceptable)
City
FL Zip Code

**8. 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. I am familiar with, and accept the obligations of registered agent.**

<b>SIGNATURE</b> Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)	<b>DATE</b>
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**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2003 Fee will be \$550.00**  
**Make Check Payable to Florida Department of State**

<b>9. Election Campaign Financing</b> Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
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10. OFFICERS AND DIRECTORS	
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
P NEVILLE, SHAWN R 7880 BENT BRANCH DR IRVING TX 75063	
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
SVP APPLBAUM, LEE D 7880 BENT BRANCH DR DALLAS TX 75201	
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
VP COLTER, WARREN Z 7880 BENT BRANCH DR DALLAS TX 75287	
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
VP WINTON, NANCY L 7880 BENT BRANCH DR CARROLLTON TX 75007	
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
AS WILSON, MARY B 7880 BENT BRANCH DR DALLAS TX 75244	
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
AS GALANTE, ANDREA 7880 BENT BRANCH DR GRAPEVINE TX 76051	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
(SEE ATTACHED)	
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

**12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.**

<b>SIGNATURE:</b> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	MARYBETH WILSON	1/16/03 (972) 501-5800
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CR2E034 (10/02)

*Attachment*  
*90100011141 90011862*

FOOTACTION/FAN CLUB/ OPEN COUNTRY/UPRISE - SUBSIDIARIES

PRESIDENT

R. SHAWN NEVILLE  
575-84-8155

90 MCKEE, MAHWAH, NJ., 07340  
24 B OLD FARM ROAD, DARIAN, CT  
06820 (201) 760-5100

SR VICE-PRESIDENT

LEE D. APPLBAUM  
457-65-6124

90 MCKEE MAHWAH, NJ., 07340  
279 SPRING VALLEY ROAD, PARK RIDGE, NJ  
07650 (201) 760-5100

VICE-PRESIDENT

WARREN Z. COLTER  
248-27-2179

90 MCKEE MAHWAH, NJ., 07340  
3835 GRANBURY DR., DALLAS, TX  
75287 (201) 760-5100

VICE PRESIDENT/SECRETARY

MICHAEL LYNCH  
153-68-8288

90 MCKEE MAHWAH, NJ., 07340  
122 PASADENA PLACE, HAWTHORNE, NJ.,  
7506 (201) 760-5100

VICE PRESIDENT/ASST. SECRETARY

MARY BETH WILSON  
461-76-6141

3201 ROYAL LANE, IRVING, TX., 75063  
14222 SOUTHERN PINES DRIVE  
FARMERS BRANCH, TX 75234-3720  
75244 (972) 501-5000

ASSISTANT SECRETARY

ANDREA GALANTE  
462-45-2413

3201 ROAYL LANE, IRVING, TX., 75063  
1220 OXFORD LANE, GRAPEVINE, TX  
76051 (972) 501-5000

DIRECTORS

R. SHAWN NEVILLE  
575-84-8155

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