

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000112894

Entity Name: ONE BOCA PLACE, INC.

FILED  
Apr 11, 2012  
Secretary of State

**Current Principal Place of Business:**

THREE GALLERIA TOWER 13155 NOEL RD  
STE 500  
DALLAS, TX 75240 US

**New Principal Place of Business:**

THREE GALLERIA TOWER 13155 NOEL RD STE 500  
DALLAS, TX 75240 US

**Current Mailing Address:**

THREE GALLERIA TOWER 13155 NOEL RD  
STE 500  
DALLAS, TX 75240 US

**New Mailing Address:**

THREE GALLERIA TOWER 13155 NOEL RD STE 500  
DALLAS, TX 75240 US

FEI Number: 22-3849973

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND RD.  
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

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: FARMER, DAVID N PRES  
Address: THREE GALLERIA TOWER 13155 NOEL RD STE 500  
City-St-Zip: DALLAS, TX 75240 US

Title: VPS  
Name: RAGSDALE, RONALD VPS  
Address: THREE GALLERIA TOWER 13155 NOEL RD STE 500  
City-St-Zip: DALLAS, TX 75240 US

Title: TREA  
Name: GREEN, TRACY TREA  
Address: THREE GALLERIA TOWER 13155 NOEL RD STE 500  
City-St-Zip: DALLAS, TX 75240 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: RUSSELL KOPP

\_\_\_\_\_  
POA

\_\_\_\_\_  
04/11/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date