

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

FILED

96 SEP -3 AM 8:12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

CORPORATION ANNUAL REPORT 1996	FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
--------------------------------------	--

DOCUMENT # P09961 (4)

1. Corporation Name

GSC REALTY CORPORATION

Principal Place of Business	Mailing Address
5080 Spectrum Drive Suite 1000 Dallas, Texas 75248	C/O FDIC Receiver 5080 Spectrum Drive, Ste 1500 Dallas, Texas 75248

2. Principal Place of Business
21 1910 Pacific Ave.

2a. Mailing Address

Suite, Apt. #, etc.

22 Suite 1500

Suite, Apt. #, etc.

City & State

23 Dallas, Texas 75201

City & State

Zip Country

24 25 26 27 28 29 30

3. Date Incorporated or Qualified
12/10/1987

3a. Date of Last Report
05/01/95

4. FEI Number

75-1987231

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

8. Name and Address of Current Registered Agent

CT Corporation System
1200 S. 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

500001973755-5

10/15/96 01073-007

***\$225.00 PL ***\$225.00

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	President
NAME	John Schug
STREET ADDRESS	5080 Spectrum Dr. #1000 Dallas, TX
CITY - ST - ZIP	

TITLE	Vice President
NAME	Ernest Rodriguez
STREET ADDRESS	5080 Spectrum Dr. #1000 Dallas, TX
CITY - ST - ZIP	

TITLE	Secretary/Treasurer
NAME	John Fisher
STREET ADDRESS	5080 Spectrum Dr. #1000 Dallas, TX
CITY - ST - ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME		
13 STREET ADDRESS		
14 CITY - ST - ZIP		

21 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME		
23 STREET ADDRESS		
24 CITY - ST - ZIP		

31 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME		
33 STREET ADDRESS		
34 CITY - ST - ZIP		

41 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME		
43 STREET ADDRESS		
44 CITY - ST - ZIP		

51 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME		
53 STREET ADDRESS		
54 CITY - ST - ZIP		

61 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME		
63 STREET ADDRESS		
64 CITY - ST - ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 118.07(5)(k), 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:

John Schug John Schug
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-17-96 1-800-319-1444
Date Daytime Phone

X 6908