

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

PROFIT CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P14518 (5)**

1. Corporation Name

SOUTH FLORIDA INDUSTRIAL DIVISION #1, INC.



Principal Place of Business

Mailing Address

2001 ROSS AVENUE
SUITE 3500
DALLAS TX 75201

2001 ROSS AVENUE
SUITE 3500
DALLAS TX 75201

| | |
|--|--|
| 3. Date Incorporated or Qualified 05/19/1987 | 3a. Date of Last Report 03/08/1995 |
| 4. FEI Number 75-2176234 | Applied For <input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |
| 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> | \$5.00 May Be Added to Fees |
| 8. This corporation has liability for intangible tax under s 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | |

| | |
|--------------------------------|-------------------------|
| 2. Principal Place of Business | 2a. Mailing Address |
| 21. Suite, Apt. #, etc. | 26. Suite, Apt. #, etc. |
| 22. City & State | 27. City & State |
| 23. Zip | 28. Zip |
| 24. Country | 29. Country |
| 25. Country | 30. Country |

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PRENTICE HALL LEGAL & FINANCIAL SERVICES
110 NORTH MAGNOLIA, SUITE 105
TALLAHASSEE FL 32301

| |
|---|
| 81. Name SAME |
| 82. Street Address (P.O. Box Number is Not Acceptable) 1801 HAYS STREET |
| 83. SUITE 105 |
| 84. City TALLAHASSEE |
| 85. Zip Code FL 32301 |

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 | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|----------------------------|------------------------------|---|--|
| TITLE | PD | 1.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | WILLIAMS, J. McDONALD | 1.2 NAME | |
| STREET ADDRESS | 2001 ROSS AVENUE, SUITE 3500 | 1.3 STREET ADDRESS | |
| CITY-ST-ZIP | DALLAS TX 75201 | 1.4 CITY-ST-ZIP | |
| TITLE | V | 2.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | GEORGE, VINCENT L. | 2.2 NAME | |
| STREET ADDRESS | 2001 ROSS AVE., SUITE 3500 | 2.3 STREET ADDRESS | |
| CITY-ST-ZIP | DALLAS TX 75201 | 2.4 CITY-ST-ZIP | |
| TITLE | VD | 3.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | CROW, HARLAN R. | 3.2 NAME | |
| STREET ADDRESS | 2001 ROSS AVE., SUITE 3500 | 3.3 STREET ADDRESS | |
| CITY-ST-ZIP | DALLAS TX 75201 | 3.4 CITY-ST-ZIP | |
| TITLE | T | 4.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | BROWN, RONALD S | 4.2 NAME | |
| STREET ADDRESS | 2001 ROSS AVENUE, SUITE 3500 | 4.3 STREET ADDRESS | |
| CITY-ST-ZIP | DALLAS TX | 4.4 CITY-ST-ZIP | |
| TITLE | S | 5.1 TITLE | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME | ENGLE, CHERYL | 5.2 NAME | Donna Gullledge |
| STREET ADDRESS | 2001 ROSS AVENUE, SUITE 3500 | 5.3 STREET ADDRESS | 2001 Ross Ave. Suite 3500 |
| CITY-ST-ZIP | DALLAS TX | 5.4 CITY-ST-ZIP | Dallas, TX 75201 |
| TITLE | AS | 6.1 TITLE | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME | PETERSON, PAMELA B. | 6.2 NAME | Asst. Secy |
| STREET ADDRESS | 2001 ROSS AVE., SUITE 3500 | 6.3 STREET ADDRESS | Cynthia J. Brown |
| CITY-ST-ZIP | DALLAS TX 75201 | 6.4 CITY-ST-ZIP | 2001 Ross Ave. Suite 3500 |

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 119.07(3)(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:

Donna Gullledge Donna Gullledge 1/31/96

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

214/979-5400

Daytime Phone #

CR2E034 (12/95)