

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 14, 2001 8:00 am
Secretary of State

05-14-2001 90256 003 ***150.00

0591277

DOCUMENT # P14885

1. Entity Name

DTM COCONUT GROVE, INC.

Principal Place of Business

**755 CROSSOVER LANE
 MEMPHIS TN 38117-4900
 US**

Mailing Address

**9336 CIVIC CENTER DR.
 BEVERLY HILLS CA 90210**

2. Principal Place of Business

9336 CIVIC CENTER DR

3. Mailing Address

Suite, Apt. #, etc.

City & State

BEVERLY HILLS CA

City & State

4. FEI Number

86-0682711

Applied For

Not Applicable

Zip

90210

Country

USA

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY
 1201 HAYS STREET
 TALLAHASSEE FL 32301**

7. Name and Address of New Registered Agent

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐
 (See criteria on back)

**FILE NOW!!! FEE IS \$150.00
 After MAY 1, 2001 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	HUBER, KENDALL J	
STREET ADDRESS	755 CROSSOVER LANE	
CITY-ST-ZIP	MEMPHIS TN 38117	
TITLE	V	<input checked="" type="checkbox"/> Delete
NAME	HALE, DAN L	
STREET ADDRESS	755 CROSSOVER LANE	
CITY-ST-ZIP	MEMPHIS TN 38117	
TITLE	VAS	<input checked="" type="checkbox"/> Delete
NAME	HALPERN, RONALD M	
STREET ADDRESS	755 CROSSOVER LANE	
CITY-ST-ZIP	MEMPHIS TN 38117	
TITLE	VSTD	<input checked="" type="checkbox"/> Delete
NAME	HARRISON, WILLIAM S	
STREET ADDRESS	755 CROSSOVER LANE	
CITY-ST-ZIP	MEMPHIS TN 38117	
TITLE	VAT	<input type="checkbox"/> Delete
NAME	MULROY, BRYAN R JR	
STREET ADDRESS	755 CROSSOVER LANE	
CITY-ST-ZIP	MEMPHIS TN 38117	
TITLE	VAT	<input type="checkbox"/> Delete
NAME	STANDEFER, STEVEN W	
STREET ADDRESS	755 CROSSOVER LANE	
CITY-ST-ZIP	MEMPHIS TN 38117	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PRESIDENT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	STEVEN P. PORTER	
STREET ADDRESS	9336 CIVIC CENTER DR	
CITY-ST-ZIP	BEVERLY HILLS CA 90210	
TITLE	VDP - TREASURER	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	CARLOS GARCIA	
STREET ADDRESS	9336 CIVIC CENTER DR	
CITY-ST-ZIP	BEVERLY HILLS CA 90210	
TITLE	VAS	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	K. ALLEN ANDERSON	
STREET ADDRESS	9336 CIVIC CENTER DR	
CITY-ST-ZIP	BEVERLY HILLS CA 90210	
TITLE	VP - SECRETARY	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	M. HUE SMITH III	
STREET ADDRESS	9336 CIVIC CENTER DR	
CITY-ST-ZIP	BEVERLY HILLS CA 90210	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

M. Hue Smith III

Date

4-26-01

Daytime Phone #

312-278-4321

CR2E034 (10/00)