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 # **P15976** **(4)**

1. Corporation Name

MONTGOMERY ESTATES, INC.

Principal Place of Business
12222 MERIT DR
STE 1100
DALLAS TX 75251-2212
US

Mailing Address
111 SUTTER STREET
MAC #0188-165
SAN FRANCISCO CA 94163
US

3. Date Incorporated or Qualified: 09/15/1987
3a. Date of Last Report: 02/09/1995

2. Principal Place of Business
21 12377 Merit Drive
Suite, Apt. #, etc.
22 300
City & State
23 Dallas, Texas
Zip 24 75251
Country 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29
Country 30

4. FEI Number: 94-2582041 — 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

9. 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 **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.0505, 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 I accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE
Signature of Current Registered Agent or Officer of Registered Agent — Print Name and Signature of Person Completing Form — DATE

12. OFFICERS AND DIRECTORS

TITLE	P	☐ DELETE
NAME	CUDDY, HARRY L.	
STREET ADDRESS	343 SANSOME STR	
CITY, ST, ZIP	SAN FRANCISCO CA	
TITLE	ASV	☐ DELETE
NAME	DESPOL, ANDREA	
STREET ADDRESS	333 SO GRAND AVE, STE 900	
CITY, ST, ZIP	LOS ANGELES CA	
TITLE	ASV	☐ DELETE
NAME	BEHREND, DEBORAH K.	
STREET ADDRESS	4643 S ULSTER ST #1400	
CITY, ST, ZIP	DENVER CO	
TITLE	T	☐ DELETE
NAME	TEARINGTON, WILLIAM R	
STREET ADDRESS	2120 E PARK PL, STE 100	
CITY, ST, ZIP	EL SEGUNDO CA	
TITLE	VAS	☐ DELETE
NAME	ZARAY-MIZRAHI, RUTH	
STREET ADDRESS	333 SO GRAND AVE, STE 900	
CITY, ST, ZIP	LOS ANGELES CA	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY, ST, ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		☐ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY, ST, ZIP		
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY, ST, ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY, ST, ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY, ST, ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY, ST, ZIP		
6.1 TITLE	Assistant Secretary	☐ Change ☒ Addition
6.2 NAME	Patricia A. Mancill	
6.3 STREET ADDRESS	111 Sutter Street	
6.4 CITY, ST, ZIP	San Francisco, CA 94163	

14. I do hereby certify that the information supplied with this form 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 attached sheet with an address.

SIGNATURE: Patricia A. Mancill
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-29-96 (415) 396-4514
Date — Daytime Phone #

CR2E034 (12/95)