FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE

Katherine Harris

ANNUAL REPORT Secretary of State 1000 DIVISION OF CORPORATIONS

Mar 02, 1999 8:00 am Secretary of State 03-02-1999 90057 010 ***450.00

	1333				-
DOCU	MENT # P18472				
	TA ENTRY, INC.				
MUO DM	IA ENTITE RIO			2001/2011 300 1400 14161 01014 40010 1187 01871 014))) #28() 0)0() 0 (#1) 0 10)(20)(
Principal Plac	e of Business	Mailing Address			ist minit ninti ninti ninti ninti 1001
510 WEST PARKLAND DRIVE 2828 N. HASKELL SANDY UT 84070 10TH FLOOR					
				DO NOT WRITE IN THIS	SPACE
		DALLAS TX 75204		3. Date Incorporated or Qualifed	
				03/18/1988	1
2. Principal F	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		87-0430896	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27		- Control of States Bosies	Fee Required
City & Sta	te	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28 7in	Country	Trust Fund Contribution	Added to Fees
Zip	Country		Country	8. This corporation owes the current year Inta	ingible ∐Yes ∐No
24	9. Name and Address of Currer			Personal Property Tax. 10. Name and Address of New Registered A	
	- Halle Sild Addition of Guille	nt regions ou rigorit	81 Name		
CT	CORPORATION SYSTEM		82 Street Addr	ess (P.O. Box Number is Not Acceptable)	
1280 SO PINE ISLAND ROAD			82 Street Addr	ess (F.O. Box Number is Not Acceptable)	
PLA	NTATION. FL FL 33324		83		
			84 City	_	85 Zip Code
				<u>_FL</u>	
11. Pursuant	to the provisions of Sections 607.050	02 and 607.1508, Florida Statutes, the	he above-named corp	oration submits this statement for the purpose of on's board of directors. I hereby accept the appoin	changing its registered itment as registered
agent. I a	am familiar with, and accept the obliga	ations of, Section 607.0505, Florida	Statutes.	on a bound of directors. Thoropy descept the appears	
SIGNATURE				d when reinstation) DATE	
12.	Signature, typed or printed name of registered age		stered Agent signature require 13.	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12
TITLE	CD		1.1 TITLE		Change Addition
NAME	RICH, JEFFREY A		1.2 NAME		
STREET ADDRESS			1.3 STREET ADDRESS		
CITY-ST-ZIP	DALLAS TX 75204		1.4 CITY-ST-ZIP		
TITLE	PD	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	BLODGETT, LYNN		2.2 NAME		•
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP	SANDY UT 84070		2. 4 CITY-ST-ZIP		
TITLE	VPD	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	BLODGETT, THOMAS		3.2 NAME		
STREET ADDRESS	* · * · · · · · · · · · · · · · · · ·		3.3 STREET ADDRESS		
CITY-ST-ZIP	SANDY UT 84070		3.4. CITY-ST-ZIP		Change Addition
TITLE	S	1	4.1 TITLE		
NAME	BLACK, DAVID W		4. 2 NAME 4.3 STREET ADDRESS		
STREET ADDRESS		i i			
CITY-ST-ZIP	DALLAS TX 75204		4.4 CITY-ST-ZIP 5.1 TITLE		Change Addition
NAME	VINEYARD, NANCY		5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS 3.0	988 N. Central Expressway	
CITY-ST-ZIP	DALLAS TX 75204		5.4 CITY-ST-ZIP	oo n. centrar Expressway	
TITLE	DALLAS IN 13204		6.1 TITLE		Change Addition
NAME	HORTENSTINE, HENRY		6.2 NAME		
STREET ADDRESS		ĺ	6.3 STREET ADDRESS		
	work it is within ///L		6.4 CITY+ST-ZIP		

14. 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 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 of an attachment with an address, with all other like empowered.

SIGNATURE:

David W. Black, Secretary Jan 11, 1999 214-841-6197