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Jan 27 1997 8:00am
Secretary of State

**PROFIT
CORPORATION
ANNUAL REPORT
1997**



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

DOCUMENT # P20476 (8)

1. Corporation Name:
TCC TAMPA INDUSTRIAL, INC.



Principal Place of Business
2001 ROSS AVENUE
SUITE 3500
DALLAS TX 75201

Mailing Address
2001 ROSS AVENUE
SUITE 3500
DALLAS TX 75201-2998

3. Date Incorporated or Qualified
08/12/1988

3a. Date of Last Report
02/19/1996

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

4. FEI Number
75-2245169

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

10. Name and Address of New Registered Agent

PRENTICE HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

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 607.1508, 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 that of applicable) (NOTE: Registered Agent signature required when reinstating) **DATE**

12. OFFICERS AND DIRECTORS ☐ **DELETE** **13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12** ☐ **Change** ☐ **Addition**

T BROWN, RONALD S 2001 ROSS AVENUE, SUITE 3500 DALLAS TX	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
AS BROWN, CYNTHIA J. 2001 ROSS AVENUE, SUITE 3500 DALLAS TX	1.2 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
DP WILLIAMS, J. McDONALD 2001 ROSS AVE., #3500 DALLAS TX	1.3 STREET ADDRESS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
VD CROW, HARLAN R. 2001 ROSS AVE. #3500 DALLAS TX	1.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
V VINCENT, GEORGE L. 2001 ROSS AVE. #3500 DALLAS TX	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
S GULLEDGE, DONNA 2001 ROSS AVENUE, SUITE 3500 DALLAS TX	2.2 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	2.3 STREET ADDRESS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	2.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	3.2 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	3.3 STREET ADDRESS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	3.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	4.2 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	4.3 STREET ADDRESS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	5.2 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	5.3 STREET ADDRESS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	6.2 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	6.3 STREET ADDRESS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I do 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 on an attachment with an address.

SIGNATURE: *Donna Gullledge* **Donna Gullledge** **1/9/97** **214/863-4000**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR **Date** **Daytime Phone #**

CR2E034 (9/96)