

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

FILED
Apr 10 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P22458 (4)

1. Corporation Name
CONCORD HOLDINGS CORPORATION



Principal Place of Business 200 CONCORD PLAZA DRIVE SUITE 303 SAN ANTONIO TX 78216 US	Mailing Address 200 CONCORD PLAZA DRIVE SUITE 303 SAN ANTONIO TX 78216 US
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DO NOT WRITE IN THIS SPACE

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 Country
24 Zip	25 Country
29 Zip	30 Country

3. Date Incorporated or Qualified 12/30/1988	
4. FEI Number 74-2503565	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 owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
 1200 SOUTH 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	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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> DELETE
NAME	EDDY, JAMES H., JR.	
STREET ADDRESS	200 CONCORD PLAZA DRIVE SUITE 303	
CITY-ST-ZIP	SAN ANTONIO TX	
TITLE	VI	<input type="checkbox"/> DELETE
NAME	MOORE, ERIC B.	
STREET ADDRESS	200 CONCORD PLAZA DRIVE SUITE 303	
CITY-ST-ZIP	SAN ANTONIO TX	
TITLE	V	<input type="checkbox"/> DELETE
NAME	ELLIS, WILLIAM T	
STREET ADDRESS	200 CONCORD PLAZA DRIVE SUITE 303	
CITY-ST-ZIP	SAN ANTONIO TX	
TITLE	SV	<input type="checkbox"/> DELETE
NAME	KERR, JUDITH BRAZIL	
STREET ADDRESS	200 CONCORD PLAZA DRIVE SUITE 303	
CITY-ST-ZIP	SAN ANTONIO TX	
TITLE	D	<input type="checkbox"/> DELETE
NAME	LOBO, HUMBERTO M.	
STREET ADDRESS	200 CONCORD PLAZA DRIVE SUITE 303	
CITY-ST-ZIP	SAN ANTONIO TX	
TITLE	D	<input type="checkbox"/> DELETE
NAME	LOBO, JAVIER M.	
STREET ADDRESS	200 CONCORD PLAZA DRIVE SUITE 303	
CITY-ST-ZIP	SAN ANTONIO TX	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
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 on an attachment with an address.

SIGNATURE _____ DATE _____

JUDITH L. KERR (210)
 APR 10 1998

CR2E034 (10/97)