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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P23861

(8)

TCR NORTH FLORIDA APARTMENTS, INC.

FILED May 18 1998 8:00am Secretary of State

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Principal Place of Business		Mailing Address		. 14011881 110 (1885 1110, 19110 21101 1181 61811 81	dit Bibli bibli Gibli Biffit (anı	
541 S ORLANDO AVE STE 210 MAITLAND FL 32751		541 S ORLANDO AVE STE 210 MAITLAND FL 32751			DO NOT WRITE IN THI	S SPACE
US		US		3. Date Incorporated or Qualified 04/13/1989		
2. Principal Place of Business 21		2a. Mailing Address		4. FEI Number	Applied For	
		26			75-2268095	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 24	Country 25	7ip 29	30	untry	This corporation owes or has paid the of Personal Property Tax due June 30.	current year Intangible
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent	
HOEKSEMA, DOUGLAS A 541 S ORLANDO AVE STE 210				81 Name		
				82 Street A	Address (P.O. Box Number is Not Acceptable)	
	TLAND FL 32751			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. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Change Addition 11 TITLE TITLE PACE, RANDY J. NAME 1.2 NAME 717 N HARWOOD STREET ADDRESS 1.3 STREET ADDRESS **DALLAS TX** CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition TITLE 2.1 TITLE HOEKSEMA, DOUGLAS A. NAME 2.2 NAME **541** S ORLANDO AVE #210 STREET ADDRESS 2.3 STREET ADDRESS MAITLAND FL CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE ☐ Change ■ Addition TITLE 3.1 TITLE TERWILLIGER, J.R. NAME 3.2 NAME 2859 PACES FERRY RD #1400 STREET ADORESS 3.3 STREET ADDRESS ATLANTA GA CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change ☐ Addition 4.1 TITLE TITLE CROW, HARLAN R 4. 2 NAME NAME 2001 ROSS AVE #3500 STREET ADDRESS 4.3 STREET ADDRESS DALLAS TX CITY-ST-ZIP 4.4 CITY - \$1 - ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 54 CITY-ST-7IP CITY-ST-ZIP DELETE Change Addition TITLE 61 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

6.4 CITY - ST - ZIP 14. Thereby certify that the information supplied with this filling 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, of on an attachment with an agreess.