

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

FILED
May 09 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P26870**

(6)

1. Corporation Name
M-V IC INC.



Principal Place of Business
**2911 TURTLE CREEK BLVD
SUITE 500, LB 513
DALLAS TX 75219
US**

Mailing Address
**2911 TURTLE CREEK BLVD
SUITE 500, LB 513
DALLAS TX 75219-6223
US**

3. Date Incorporated or Qualified **11/13/1989** 3a. Date of Last Report **04/17/1996**

2. Principal Place of Business

2a. Mailing Address

4. FET Number

Applied For
Not Applicable

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

75-2148124

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

22 City & State

27 City & State

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

23 Zip Country

28 Zip Country

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

24 25

29 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **PD** ☐ DELETE
NAME **LEHRMANN, HAROLD W.**
STREET ADDRESS **2911 TURTLE CREEK BLVD**
CITY-ST-ZIP **DALLAS TX**

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE **V** ☒ DELETE
NAME **WALLENTINE, STEVE**
STREET ADDRESS **2911 TURTLE CREEK BLVD**
CITY-ST-ZIP **DALLAS TX**

2.1 TITLE ☐ Change ☒ Addition
2.2 NAME **VP/TREAS**
2.3 STREET ADDRESS **John F. Formby**
2911 Turtle Creek Blvd., Suite 450
Dallas, TX 75219

TITLE **YSD** ☐ DELETE
NAME **KENNEDY, KEITH W.**
STREET ADDRESS **2911 TURTLE CREEK BLVD**
CITY-ST-ZIP **DALLAS, TX**

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE **VS** ☐ DELETE
NAME **MCWILLIAMS, J RUSSELL**
STREET ADDRESS **2911 TURTLE CREEK BLVD**
CITY-ST-ZIP **DALLAS TX**

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE **D** ☐ DELETE
NAME **EULICH, JOHN F.**
STREET ADDRESS **2911 TURTLE CREEK BLD**
CITY-ST-ZIP **DALLAS TX**

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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. My name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE _____

CR2E034 (9/96)