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

PROFIT CORPORATION ANNUAL REPORT

1999

1. Corporation Name

DOCUMENT # P27230

REALTY CONSOLIDATED MANAGEMENT, INC.



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90041 020 ***150.00

S LOBELLOCK COM PROTE EMPLO CREATO CORRE COME DECISION CLOCK CARLE CLOCK CARLE COME

) DIZI) DIZI) 1991	
Principal P ace	of Business	Mailing Address						i diáti aiáil taái	
1505 FEDERAL STREET P. O. BOX 1920 DALLAS TX 75221 US		1505 FEDERAL STREET P. O. BOX 1920 DALLAS TX 75221 US			DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualifed				
		00				12/11/1989		1	
2. Principal Pl	ace of Business	2a. Mailing Address	.			4. FEI Number	1	Apr lied For	
21		26				75-2298960	1	Not Applicable	
Suite, Apt. :	#, etc.	Suite, Apt. #, etc.				5. Certifcate of Status Desired	\$8.75	A iditional	
22		27				3. Certificate of Status Desired	Fee F	Recuired	
City & State		City & State				6. Election Campaign Financing Trust Fund Contribution	•	0 May Be dtc Fees	
Zip	Cour try	Zip	Country			8. This corporation owes the current year	ntangible		
24	25	29	30			Persor al Property Tax.	☐ Yes	I]No	
	9. Name and Address of Curren	10. Name and Address of New Registere	d Agent						
	DARRON AVATELL			81	Name			ĺ	
	CORPORATION SYSTEM			82	Street Ac dr	ess (P.O. Box Number is Not Acceptable)			
1200 SOUTH PINE ISLAND ROAD									
PLAN	ITATION FL 33324			83					
				84	City	F	85 Zip	C ode	
		Card COT AEOR Florida Chabita	a tha a			<u>-</u>	_ , ,	ts registered	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named of provisions usbmits 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 na ne of registered agen	of and title if applicable (NOT =-	Registered	Ageni	t signature regulire	d when reinstating) DATE		—— ì	
12.		() DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS	AND DIRECT	OFIS IN 12	
TITLE	PCD	☐ DELETE	1.1 TITLE				☐ Change	e	
NAME	POGUE, MACK		1.2 NAME					i	
STREET ADDRESS	1505 FEDERAL STREET		1.3 ST	REET	ADDRESS				
CITY-ST-ZIP	DALLAS TX		1.4 CI	TY-ST	-ZIP				
TITLE	V	☐ DELETE	2.1 TI	ΓLE			Change	e 🔲 Addition	
NAME	DUVALL, WILLIAM C.		2.2 NAME						
STREET ADDRE 3S	1505 FEDERAL STREET		2.3 S1	REET	ADDRESS				
CITY-ST-ZIP DALLAS TX			2 4 CITY-ST-		T-ZIP				
TITLE	VST	☐ DELETE	31 TITLE				Change	e 🗌 Addition	
NAME	DAVIS, NANCY A		3.2 NAME					Į	
STREET ADORE 3S	1505 FEDERAL STREET		3.3 STRI		ADDRESS				
CITY-ST-ZIP	DALLAS TX		3.4. CITY-		T-ZIP			- Addition	
TITLE	V	☐ DELETE	4.1 TI				Change	e	
NAME	JACKS, DAN M.		4. 2 NAME		[İ	
STREET ADDRE 3S	1505 FEDERAL STREET				ADDRESS			1	
CITY-ST-ZIP	DALLAS TX		4.4 CITY-		ZIP		Change	e Addition	
TITLE	AS	☐ DELETE	5 1 TI 5.2 N/				Change	,	
NAME	rene II, celon Ann				ADDDESS				
STREET ADDRE 3S	1505 FEDERAL ST	LENEUAL 91		5.3 STREET ADDRESS 5.4 CITY-ST-ZIP					
CITY-ST-ZIP	DALLAS TX	.DO IA		TY-ST	-217		☐ Change	e	
TITLE		☐ pereie	6.2 N				ondinge		
NAME					ADDRESS				
STREET ADDRESS			033	nutil	T TIP				

14. Hereb / certify that the informat on 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, with all other like embedget. Ann Everett

SIGNATURE:

Asst. Secretary