

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State **Z3601**
DIVISION OF CORPORATIONS

DOCUMENT # P28285 (5)

1. Corporation Name

LINCOLN PROPERTY COMPANY MANAGEMENT, INC.

Principal Place of Business

**1505 FEDERAL STREET
P. O. BOX 1920
DALLAS TX 75221-1920**

Mailing Address

**P O BOX 1920
P. O. BOX 1920
DALLAS TX 75221
US**



2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

Zip

Country

30

9. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324**

3. Date Incorporated or Qualified

02/27/1990

3a. Date of Last Report

04/26/1995

4. FEI Number

75-2301120

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

10. Name and Address of New Registered Agent

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 if not applicable, _____

2001E Registered Agent Signature required when registering _____

DATE _____

12. OFFICERS AND DIRECTORS

TITLE

PD

☐ DELETE

NAME

**POGUE, MACK
1505 FEDERAL ST
DALLAS TX**

STREET ADDRESS

CITY - ST - ZIP

TITLE

V

☐ DELETE

NAME

**BYRNE, TIMOTHY
1505 FEDERAL ST
DALLAS TX**

STREET ADDRESS

CITY - ST - ZIP

TITLE

VST

~~XXX~~ DELETE

NAME

**WALLIS, W. MARK
1505 FEDERAL ST
DALLAS TX**

STREET ADDRESS

CITY - ST - ZIP

TITLE

V

☐ DELETE

NAME

**WILLIAM, DUVALL C.
1505 FEDERAL ST
DALLAS TX**

STREET ADDRESS

CITY - ST - ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

☐ Change

☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

☐ Change

☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

☐ Change

☒ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

VST

**Nancy A. Davis
1505 Federal Street
Dallas, Texas 75201**

4.1 TITLE

☐ Change

☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

☐ Change

☒ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

**Asst Secretary
Leigh Ann Everett
1505 Federal Street
Dallas, Texas 75201**

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 is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: *Leigh Ann Everett*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Leigh Ann Everett, Asst Sec 4-2-96 214-740-4440

Date

Deputy Phone #

CR2E034 (12/95)