

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Apr 14, 1999 8:00 am  
Secretary of State

04-14-1999 90204 001 \*\*\*150.00

DOCUMENT # P28285

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

2a. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

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

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 owes the current year Intangible  
Personal Property Tax.

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12.

OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☐ DELETE

NAME POGUE, MACK  
STREET ADDRESS 1505 FEDERAL ST  
CITY-ST-ZIP DALLAS TX

1.1 TITLE ☐ Change ☐ Addition

TITLE V ☐ DELETE

NAME BYRNE, TIMOTHY  
STREET ADDRESS 1505 FEDERAL ST  
CITY-ST-ZIP DALLAS TX

1.2 NAME ☐ Change ☐ Addition

TITLE VST ☐ DELETE

NAME DAVIS, NANCY A.  
STREET ADDRESS 1505 FEDERAL STREET  
CITY-ST-ZIP DALLAS TX

1.3 STREET ADDRESS ☐ Change ☐ Addition

TITLE V ☐ DELETE

NAME WILLIAM, DUVALL C.  
STREET ADDRESS 1505 FEDERAL ST  
CITY-ST-ZIP DALLAS TX

1.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE AS ☐ DELETE

NAME EVERETT, LEIGH ANN  
STREET ADDRESS 1505 FEDERAL STREET  
CITY-ST-ZIP DALLS TX

2.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

2.2 NAME ☐ Change ☐ Addition

2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

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

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

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

6.1 TITLE  
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, with all other persons who have signed this report.

SIGNATURE:

Leigh Ann Everett  
Asst. Secretary

Date

(214) 740-4440

Daytime Phone

CR2E034 (1/98)