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PROFIT
CORPORATION
ANNUAL REPORT

1996

DOCUMENT # P31840

1. Corporation Name

TRST ORLANDO, INC.



FLORIDA DEPARTMENT OF STATE

Samuel B. Matheson

Secretary of State

DIVISION OF CORPORATIONS

(2)



Principal Place of Business

1000 RED RIVER
AUSTIN TX 78701-2627

Managing Address

1000 RED RIVER
AUSTIN TX 78701-2627

2. Principal Place of Business

2a. Managing Address

21

26

Subs. Apt. #, etc.

Subs. Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

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25

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9. Name and Address of Current 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 607.06(2) and 607.17(2), Florida Statutes, the above named registered agent 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, I accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.06(2), Florida Statutes.

SIGNATURE

12. SIGNATURE OF OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP
PD	BLEVIN, WAYNE	5908 LONESOME VALLEY TRAIL	AUSTIN TX
VD	YOUNG, JOHN E.	7170 LAS VENTANAS	AUSTIN TX
STD	BARRON, P. M.	5816 TRIBUTARY RIDGE DR.	AUSTIN TX
D	CAMP, FRANK	ROUTE 1 BOX 255	KILGORE TX
D	YOUNGBLOOD, KNEELAND	5950 BERKSHIRE LANE, STE. 950	DALLAS TX

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP
President	Charles L. Dunlap	1000 Red River Street	Austin, Texas 78701
Secretary/Treasurer	Wayne Fickel	1000 Red River Street	Austin, Texas 78701

14. I do hereby certify that the information supplied with this form is voluntarily furnished and is true and correct to the best of my knowledge. I further certify that the information included on this form is a part of my official record and is not to be used for any other purpose 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 in the registration number, as printed 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 both after most valid address.

SIGNATURE: Wayne Fickel

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 4, 1996 (512)397-6409

CR2E034 (12/95)