

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
SARAH B. MAHONEY
Secretary of State
TALLAHASSEE, FLORIDA 32301

APPROVED
AND
FILED

55 MAY -1 AM 4:58

DOCUMENT # **P35614**

(7)

1. Corporation Name

THC CAPITAL, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

**5847 SAN FELIPE, SUITE 3900
HOUSTON TX 77057**

Mail Stop Address

**5847 SAN FELIPE, SUITE 3900
HOUSTON TX 77057**

DO NOT WRITE IN THIS SPACE

3. Filing Date (or qualified)	3a. Date of Last Report
09/23/1991	03/08/1994
4. FID Number	Applied For
76-0299363	☐ Not Applicable
5. Certificate of Status (Required)	☐ \$8.75 Additional Fee Required
6. Election Campaign Financing / Trust Fund Contributions	☐ \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 196.11(2) Florida Statutes	☐ Yes ☒ No

2. Filing Date (or qualified)	2a. Mailed Address
21	26
Suite Address	Suite Address
22 Suite 3600	27 Suite 3600
City & State	City & State
23	28
City	City
24	29
State	State
25	30
County	County

9. Name and Address of Current Registered Agent

**THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301**

10. Name and Address of New Registered Agent

81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83.
84. City
85. Zip Code

FL

11. Pursuant to the provisions of Sections 607.01 and 607.02, Florida Statutes, the above named corporation submits the statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. It is hereby authorized by the corporation to sign this statement, thereby, accept the appointment as registered agent. I am familiar with and accept the obligations of this position. Florida Statutes.

SIGNATURE

12. OFFICERS, APPLICANTS AND DIRECTORS		13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 1995	
TITLE	PD BERGERON, B.D. 5847 SAN FELIPE, #3900 HOUSTON TX	TITLE	Director / Co-Chairman ☒ Change ☐ Addition
NAME		NAME	Suite 3600
STREET ADDRESS		STREET ADDRESS	
CITY, ST, ZIP		CITY, ST, ZIP	
TITLE	VSD BOWDEN, J. MURRY 5847 SAN FELIPE, #3900 HOUSTON TX	TITLE	Director / Co-Chairman ☒ Change ☐ Addition
NAME		NAME	Suite 3600
STREET ADDRESS		STREET ADDRESS	
CITY, ST, ZIP		CITY, ST, ZIP	
TITLE	TAS THOMPSON, MICHAEL 5847 SAN FELIPE, #3900 HOUSTON TX	TITLE	President / Secretary ☒ Change ☐ Addition
NAME		NAME	Suite 3600
STREET ADDRESS		STREET ADDRESS	
CITY, ST, ZIP		CITY, ST, ZIP	
TITLE	AS MARTINO, VERA 5847 SAN FELIPE, #3900 HOUSTON TX	TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY, ST, ZIP		CITY, ST, ZIP	
TITLE		TITLE	Jr. Fathene, James L. ☐ Change ☒ Addition
NAME		NAME	Executive V.P. / A.S.
STREET ADDRESS		STREET ADDRESS	5847 San Felipe, Suite 3600
CITY, ST, ZIP		CITY, ST, ZIP	Houston, TX 77057
TITLE		TITLE	Treasurer ☐ Change ☒ Addition
NAME		NAME	Buchanan, Bo
STREET ADDRESS		STREET ADDRESS	5847 San Felipe, Suite 3600
CITY, ST, ZIP		CITY, ST, ZIP	Houston, TX 77057

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in law 119.07(1)(b), Florida Statutes. I further certify that the information included 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 this corporation or this record holder and officer or director of this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report and my address is as indicated.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Bo Buchanan, Treas.

4-21-95

713/267-2100