FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

95 MAY -1 AM 8:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P36168** **(3)**

1. Corporation Name
TIAS, INC.

Principal Place of Business	Mailing Address
4600 GREENVILLE AVE. STE 160 DALLAS TX 75206	4600 GREENVILLE AVE. STE 160 DALLAS TX 75206

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 11/01/1991
3a. Date of Last Report: 05/01/1994

2. Principal Place of Business
21:
22: Suite, Apt. #, etc.
23: City & State
24: Zip
25: County

2a. Mailing Address
26: 4721 Morrison Dr
27: Suite, Apt. #, etc.
28: City & State: Mobile AL
29: Zip: 36609
30: County: Mobile

4. FEI Number: 75-2184881 ☐ 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

9. Name and Address of Current Registered Agent

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

10. Name and Address of New Registered Agent

81 Name: Prentice Hall Corporation System Inc.
82 Street Address (P.O. Box Number is Not Acceptable): 1201 Hays St., Ste. 105
83:
84 City: Tallahassee FL 85 Zip Code: 32301

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	11 TITLE	President	☒ Change ☐ Addition
NAME	LAVINE, LARRY	12 NAME	Sandy Beall	
STREET ADDRESS	4600 GREENVILLE, STE 160	13 STREET ADDRESS	4721 Morrison Drive	
CITY-ST-ZIP	DALLAS TX	14 CITY-ST-ZIP	Mobile AL 36609	
TITLE	ST	21 TITLE	Robert McClenagan	☒ Change ☐ Addition
NAME	SSBORDONE, JR. F B	22 NAME	4721 Morrison Drive	
STREET ADDRESS	4600 GREENVILLE, STE 160	23 STREET ADDRESS	Mobile, AL 36609	
CITY-ST-ZIP	DALLAS TX	24 CITY-ST-ZIP		
TITLE	D	31 TITLE	SR VP. Finance	☒ Change ☐ Addition
NAME	MUNFORD, JOHN	32 NAME	S. Russell Mottershead	
STREET ADDRESS	4600 GREENVILLE, STE 160	33 STREET ADDRESS	4721 Morrison Drive	
CITY ST ZIP	DALLAS TX	34 CITY-ST ZIP	Mobile, AL 36609	
TITLE	TR	41 TITLE	Secretary	☒ Change ☐ Addition
NAME	BEALL, SANDY	42 NAME	Geri Hunt	
STREET ADDRESS	4600 GREENVILLE, STE 160	43 STREET ADDRESS	4721 Morrison Drive	
CITY ST ZIP	DALLAS TX	44 CITY-ST-ZIP	Mobile, AL 36609	
TITLE	AS	51 TITLE	Asst. Sec.	☒ Change ☐ Addition
NAME	WILSON, SANDRA B	52 NAME	Walter Cole	
STREET ADDRESS	4600 GREENVILLE, STE 160	53 STREET ADDRESS	4721 Morrison Drive	
CITY ST ZIP	DALLAS TX	54 CITY-ST ZIP	Mobile, AL 36609	
TITLE	VP	61 TITLE		☒ Change ☐ Addition
NAME	THOMAS, MAZZA	62 NAME		
STREET ADDRESS	4600 GREENVILLE, STE. 160	63 STREET ADDRESS		
CITY ST ZIP	DALLAS TX	64 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)(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.

SIGNATURE: [signature] 4/28/95 (334) 244-3000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0472300 FP