

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
DIVISION OF CORPORATIONS

DOCUMENT # **P39038 (5)**

1. Corporation Name
MR PARTNERS, INC.



Principal Place of Business: **ATTN: LEGAL DEPT. 13760 NOEL ROAD, SUITE 700 LB 70 DALLAS TX 75240**
Mailing Address: **ATTN: LEGAL DEPT. 13760 NOEL ROAD, SUITE 700 LB 70 DALLAS TX 75240**

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 05/29/1992	3a. Date of Last Report 02/07/1995
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 75-2430875	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
THE PRENTICE-HALL CORPORATION SYSTEM INC. 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301				81	Name		
				82	Street Address (P.O. Box Number is Not Acceptable)		
				83			
				84	City	FL	85

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 FEI, if applicable. (NOTE: Registered Agent signatures required when re-registering)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	REED, DONALD K.	1.2 NAME	
STREET ADDRESS	13760 NOEL ROAD, #700, LB 70	1.3 STREET ADDRESS	
CITY-ST-ZIP	DALLAS TX 75240	1.4 CITY-ST-ZIP	
TITLE	V	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TAYLOR, RON K.	2.2 NAME	
STREET ADDRESS	13760 NOEL RD., SUITE 700, LB 70	2.3 STREET ADDRESS	
CITY-ST-ZIP	DALLAS TX	2.4 CITY-ST-ZIP	
TITLE	ST	3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	IRVINE, ROBERT C.	3.2 NAME	
STREET ADDRESS	13760 NOEL ROAD, #700 LB 70	3.3 STREET ADDRESS	S Donald K. Reed 13760 Noel Rd # 700, LB 70 Dallas TX 75240
CITY-ST-ZIP	DALLAS TX 75240	3.4 CITY-ST-ZIP	Dallas TX 75240
TITLE	CD	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MCNEIL, ROBERT A.	4.2 NAME	
STREET ADDRESS	13760 NOEL ROAD, #700	4.3 STREET ADDRESS	
CITY-ST-ZIP	DALLAS TX	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	T Carol A. Fahs 13760 Noel Rd. #700, LB 70 Dallas TX 75240
CITY-ST-ZIP		5.4 CITY-ST-ZIP	Dallas TX 75240
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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: *[Signature]* **Donald K. Reed, Pres.** 4/24/96 (214) 448-5800

CR2E034 (12/95)