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

PROFIT CORPORATION ANNUAL REPORT

1998

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

FILED
May 15 1998 8:00am
Secretary of State

DOCUMENT # **P39171** **(4)**

1. Corporate Name
TCR BUENA VISTA, INC.

Principal Executive Office
541 S ORLANDO AVE
STE 210
MAITLAND FL 32751
US

Mailing Address
541 S ORLANDO AVE
STE 210
MAITLAND FL 32751
US

2. Principal Place of Business
21 Street Address
22 City & State
23 Zip
24 25 County

2a. Mailing Address
26 Street Address
27 City & State
28 Zip
29 30 County

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
06/05/1992

4. FEI Number
75-2430689
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 or has paid the current year Intangible Personal Property Tax due June 30 **X** Yes [ ] No

9. Name and Address of Current Registered Agent
HOEKSEMA, DOUGLAS A
541 S ORLANDO AVE
STE 210
MAITLAND FL 32751

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 Section [illegible] 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. The corporation has authorized the officers and directors to execute this statement.

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE	PD	[ ] DELETE
NAME	HOEKSEMA, DOUGLAS A.	
STREET ADDRESS	541 S ORLANDO AVE #210	
CITY ST ZIP	MAITLAND FL	
TITLE	VD	[ ] DELETE
NAME	CROW, HARLAN R.	
STREET ADDRESS	2001 ROSS AVE. #3500	
CITY ST ZIP	DALLAS TX	
TITLE	VD	[ ] DELETE
NAME	TERWILLIGER, J. RONALD	
STREET ADDRESS	2859 PACES FERRY RD#2100	
CITY ST ZIP	ATLANTA GA	
TITLE	VTS	[ ] DELETE
NAME	PACE, RANDY J.	
STREET ADDRESS	717 N. HARWOOD, #1200	
CITY ST ZIP	DALLAS TX	
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY ST ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY ST ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	[ ] Change	[ ] Addition
12 NAME		
13 STREET ADDRESS		
14 CITY ST ZIP		
21 TITLE	[ ] Change	[ ] Addition
22 NAME		
23 STREET ADDRESS		
24 CITY ST ZIP		
31 TITLE	[ ] Change	[ ] Addition
32 NAME		
33 STREET ADDRESS		
34 CITY ST ZIP		
41 TITLE	[ ] Change	[ ] Addition
42 NAME		
43 STREET ADDRESS		
44 CITY ST ZIP		
51 TITLE	[ ] Change	[ ] Addition
52 NAME		
53 STREET ADDRESS		
54 CITY ST ZIP		
61 TITLE	[ ] Change	[ ] Addition
62 NAME		
63 STREET ADDRESS		
64 CITY ST ZIP		

14. I hereby certify that the information indicated on this report or supplemental 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 other legal entity to which this report or supplemental report is required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 of this report or in any amendment to it.

SIGNATURE: Doug Hoeksema Douglas Hoeksema 4/22/98

C92E034 (10/97)