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PROFIT
CORPORATION
ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

Mar 07 1997 8:00am

Secretary of State

Day: me Phone #

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P92000007523 (3)

WINTERVILLA GENPAR V, INC.

| Principal Place 5811 BELTLINE 1052 DALLAS TX 75: US | ROAD 240 | Mailing Address 5811 BELTLINE ROAD 1052 DALLAS TX 75240-7730 US | | | 3. Date incorporated or Qualified 11/25/1992 3a. Date of Last Report 05/01/1996 | | | |
|---|--|---|---------------------------------------|-------------------|---|---|--|-----------------------------------|
| 2. Principal Pt | ace of Business 10 COIT RA | 28. Mailing Address 26. 12770 | COIT | Ra | (| 4. FEI Number 59-3153929 | | Applied For Not Applicable |
| Suite, Apt i | #, etc. | Suite, Apt. #, etc. | | | | Certificate of Status Desired | | Additional |
| | 220 | 27 1220 | · · · · · · · · · · · · · · · · · · · | | | | Fee | Required |
| City & State | ! | City & State | | | | 6. Election Campaign Financing Trust Fund Contribution | | O May Be d to Fees |
| 1 2m | Country | Zip | Cour | itry | - | 8. This corporation has liability for it | | |
| 24 752 | 1201 | 29 75251 | 30 | | | 1 | Yes No | |
| TUC | Name and Address of Current PRENTICE-HALL CORPORATION | | | B1 1 | varne | 10. Name and Address of New Re | gistered Agent | |
| | THENTICE MALE CORPORATION 1 HAYS STREET | 1 3131EM INC. | Ĺ | | | ss (P.O. Box Number is Not Acceptab | lo) | |
| | TE 105 | | Ĺ | | areet Addres | ss (F.O. Box Number is Not Acceptab | ···· | |
| TAL | LAHASSEE FL 32301 | | | 83 | | | | |
| | | | | B4 (| City | | 85 Zi | p Code |
| office or re agent it ar SIGNATURE | o the provisions of Sections 607,0502 egistered agent, or both, in the State of familiar with and accept the obligation that seemed the obligations that the point of the sections of the sect | of Florida. Such change water tions of, Section 607.0505 | as authorized , Florida Statu | by th ites. | e corporatio | ration submits this statement for the p on's board of directors. I hereby accep d when reinstating? | urpose of changing at the appointment a |) its registered as registered |
| 12, | OFFICERS AND | | 13. | Agen; s | ignature requires | ADDITIONS/CHANGES TO OFFIC | | ORS IN 12 |
| TITLE | D | DELETE | 1.1 [0] | .E | | | ☐ Change | e 🔲 Addition |
| NAME | KRAUSS, LARRY | | 1.2 NA | | | | | |
| STREET ADDRESS | 5140 YONGE STREET #1525 WILLOWDALE ONTARIO CA | | | EET AD | 1 | | | |
| CHY-ST-ZIF TILLE | 0 | DELETE | 21 TIT | Y-\$1-2 LE | <u> </u> | | Change | e Addilion |
| N4ME | LEE, JACK | | 2 2 NAI | ME | | | _ | |
| STREET ADDRESS | 5140 YONGE STREET #1525 | | 2.3 STF | REFT ADI | DRESS | | | |
| CHY ST-ZIP | WILLOWDALE ON | DELCTE | | Y-\$1- | 7IP | | Chang | e Addition |
| Till E NAME | | ריי מנינונו | 3.1 T⊞ 3.2 NA | | | | □ euguð | - Modificiti |
| STREET ADDRESS | | | | iii. Reet ad | DRESS | | | |
| Cilly - S' - ZiF | | | 3.4. CH | Y-ST | ZIP | | | |
| THE | | ☐ DELETE | 4,1 10 | | | | Chang | e 🔲 Addition |
| NAME | | | 4. 2 NA | | | | | |
| STREET ADDRESS | | | 1 | REET AD Y-ST-2 | | | | |
| Till E | | DELETE | 5.1 TiT | | " | | ☐ Chang | e Addition |
| NAME | | | 5.2 NA | ME | | | | |
| STREET AUGUSTSS | | | 5.3 \$16 | REET AD | ORESS | | | |
| CHTY - ST - ZIP | | T DELETE | | Y-\$1-2 | !IP | | T 106 | A alatistic = |
| THEF | | DELETE | 6 1 TIT | | | | Chang | e Addition |
| NAME STREET ADDRESS | | | 6 2 NAI | ML REET AD | ORESS | | | |
| o occumumas | | | 0331 | | | | | |

14. I do hereby cort by that the information supplied with this filing 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 eath; 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.

TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR