2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P94000058237**

MALL AT 163RD ST. FOOTACTION, INC.

FILED Feb 06, 2001 8:00 am Secretary of State 02-06-2001 90331 017 ***150.00

Principal Place		Mailing Address ATTN: TAX DEPARTMENT						
STE 1420 N. Miami Fl 33162		7880 BENT BRANCH DRIVE. SUITE 100 IRVING TX 75063			•		•	
US		U\$.			T CONTROL DIA TANIA MARI MATA	II ar io eria : i zuei zaz	J o Ji ara (1	() (48) (48)
2. Principal Place of Business		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WA	ITE IN THIS SPA	CE	
City & State		City & State		4.	05 05 17 700			oplied For ot Applicable
Zip	Country	Zip	Country	5. (Certificate of Status Desired		. 75 Add	
	6. Name and Address of Current F	Registered Agent		7. 1	Name and Address of New	Registered Ager	nt	
			Name					
UNITED STATES CORPORATION COMPANY 1201 HAYS ST. SUITE 105			Street A	Street Address (P.O. Box Number is Not Acceptable)				
	= 105 AHASSEE FL 32301							
			City			FL	Zip Cod	e
8. The above	named entity submits this statement for	the purpose of changing it	s registered office of	or registered ag	ent, or both, in the State of F	lorida.		
SIGNATURE .	Signature, typed or printed name of registered agent a	nd title if applicable. (NO	TE: Registered Agent signs	ture required when re	einstating)	DATE		
O This corns	protion is aligible to esticfulte (stangible	EII E NOW	!!! FEE IS \$150		T			
Tax filing i	oration is eligible to satisfy its Intangible requirement and elects to do so.	1	001 Fee will be \$	550.00	10. Election Campaign F Trust Fund Contributi	~ —		May Be to Fees
11.	OFFICERS AND D	ì *	12.		DITIONS/CHANGES TO OF	FICERS AND DIE	RECTOR	S IN 11
TITLE	PD	☐ Delete	TITLE				Change	Addition
NAME	NEVILLE, R. SHAWN		NAME					
STREET ADDRESS CITY-ST-ZIP	7880 BENT BRANCH DR #100		STREET ADDRESS CITY-ST-ZIP					
TITLE	IRVING TX	☐ Delete	TITLE	 			Change	Addition
NAME	ROACH, DONALD V	☐ Delete	NAME	TIMO	CHY D. SITES	-13	Origings	☐ Appliton
STREET ADORESS	7880 BENT BRANCH DR. #100	•	STREET ADDRESS		_		~	-
CITY-ST-ZIP	IRVING TX 75063		CITY-ST-ZIP					
TITLE	S	☐ Delete	TITLE				Change	Addition
NAME	WINTON, NANCY L		NAME					
STREET ADDRESS CITY-ST-ZIP	7880 BENT BRANCH DR., #100		STREET ADDRESS CITY-ST-ZIP					
	IRVING TX AS			├ ──			Change	☐ Addition
TITLE NAME	RODRIGUEZ, VIKKI	☐ Delete	TITLE NAME			U	Change	☐ Addition
STREET ADDRESS	7880 BENT BRANCH DR. #100		STREET ADDRESS					
CITY-ST-ZIP	IRVING TX 75063		CITY-ST-ZIP]				
TITLE		☐ Delete	TITLE				Change	☐ Addition
NAME			NAME	Į.				
STREET ADDRESS			STREET ADDRESS					
CITY-ST-ZIP			CITY-ST-ZIP	<u> </u>				
TITLE		☐ Delete	TITLE	Į			Change	☐ Addition
NAME STREET ADDRESS			NAME STREET ADDRESS					
CITY-ST-ZIP			CITY-ST-ZIP					
	1							

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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

NANCY L WINTON