

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

0051606

PROFIT CORPORATION ANNUAL REPORT 1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS



DOCUMENT # P94000088688

1. Corporation Name
SHELBY DRIVE CORPORATION

Principal Place of Business: **1801 HERMITAGE BLVD., SUITE 600 TALLAHASSEE FL 32308 US**
 Mailing Address: **1801 HERMITAGE BLVD., SUITE 600 TALLAHASSEE FL 32308 US**

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country

9. Name and Address of Current Registered Agent

DAVID E. TODD
1801 HERMITAGE BLVD.
STE 100
TALLAHASSEE FL 32308

81 Name
 82 Street Address (P.O. Box Number is Not Acceptable)
 83 City
 84 City

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

Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agents, partner registered with this corporation)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	[] DELETE
NAME	BENNETT, DOUGLAS W	
STREET ADDRESS	1801 HERMITAGE BLVD., SUITE 600	
CITY-ST-ZIP	TALLAHASSEE FL 32308	
TITLE	D	[X] DELETE
NAME	MILLER, TODD A	
STREET ADDRESS	1801 HERMITAGE BLVD., SUITE 600	
CITY-ST-ZIP	TALLAHASSEE FL 32308	
TITLE	P	[] DELETE
NAME	SMITH, G. ANDREWS	
STREET ADDRESS	8750 N. CENTRAL EXWY., SUITE 800	
CITY-ST-ZIP	DALLAS TX 75231-6437	
TITLE	S	[] DELETE
NAME	PLUMLEE, DANIEL L.	
STREET ADDRESS	8750 N. CENTRAL EXWY., SUITE 800	
CITY-ST-ZIP	DALLAS TX 75231-6437	
TITLE	T	[X] DELETE
NAME	WELCH, MARK V.	
STREET ADDRESS	8750 N. CENTRAL EXWY., SUITE 800	
CITY-ST-ZIP	DALLAS TX 75231-6437	
TITLE	V	[] DELETE
NAME	HORTON, JAMES W.	
STREET ADDRESS	1801 HERMITAGE BLVD, SUITE 600	
CITY-ST-ZIP	TALLAHASSEE FL 32308	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	D	[] Change	[X] Addition
12 NAME	Jeffrey L. Smith		
13 STREET ADDRESS	1801 Hermitage Blvd., Suite 600		
14 CITY-ST-ZIP	Tallahassee, FL 32308		
21 TITLE	DV	[X] Change	[] Addition
22 NAME	James W. Horton		
23 STREET ADDRESS	1801 Hermitage Blvd., Suite 600		
24 CITY-ST-ZIP	Tallahassee, FL 32308		
31 TITLE	T	[] Change	[X] Addition
32 NAME	Brent W. Kroener		
33 STREET ADDRESS	8750 N. Central Expressway, Suite 800		
34 CITY-ST-ZIP	Dallas, TX 75231-6437		
41 TITLE	VAS	[] Change	[X] Addition
42 NAME	Luanne K. Good		
43 STREET ADDRESS	1801 Hermitage Blvd., Suite 600		
44 CITY-ST-ZIP	Tallahassee, FL 32308		
51 TITLE	V	[] Change	[X] Addition
52 NAME	Edward J. Daley		
53 STREET ADDRESS	8750 N. Central Expressway, Suite 800		
54 CITY-ST-ZIP	Dallas, TX 75231-6437		
61 TITLE			
62 NAME			
63 STREET ADDRESS			
64 CITY-ST-ZIP			

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FLORIDA DEPARTMENT OF STATE
 TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **12/07/1994**

4. FEI Number: **75-2571016** 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 the current year Intangible Personal Property Tax: [] Yes [X] No

10. Name and Address of New Registered Agent

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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.04(3)(c), 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, with all other like empowered

SIGNATURE: Douglas W. Bennett, Director

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-17-99

850-488-4406

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27