

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



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

FILED
May 05, 1999 8:00 am
Secretary of State

05-05-1999 90224 003 ***150.00

DOCUMENT # P95000045796

1. Corporation Name

CHC REIT MANAGEMENT CORPORATION

Principal Place of Business

3250 MARY STREET
FIFTH FLOOR
MIAMI FL 33133

Mailing Address

3250 MARY STREET
FIFTH FLOOR
MIAMI FL 33133

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/13/1995

4. FEI Number

65-0603682

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 ☐ No

2. Principal Place of Business

21 1950 Stemmons Freeway

Suite, Apt. #, etc.

22 Suite 6001

City & State

23 Dallas, Texas

Zip

24 75207

Country

2a. Mailing Address

26 1950 Stemmons Freeway

Suite, Apt. #, etc.

27 Suite 6001

City & State

28 Dallas, Texas

Zip

29 75207

Country

30

9. Name and Address of Current Registered Agent

PELTZ, ARVIN
3250 MARY STREET
SUITE 500
MIAMI FL 33133

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 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 Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DCP ☒ DELETE

NAME WEISER, SHERWOOD M
STREET ADDRESS 3250 MARY STREET, 5TH FLOOR
CITY-ST-ZIP MIAMI FL 33133

TITLE DVC ☒ DELETE

NAME LEFTON, DONALD E
STREET ADDRESS 3250 MARY STREET, 5TH FLOOR
CITY-ST-ZIP MIAMI FL 33133

TITLE VST ☒ DELETE

NAME TEMLING, W. PETER
STREET ADDRESS 3250 MARY STREET, 5TH FLOOR
CITY-ST-ZIP MIAMI FL 33133

TITLE ASAT ☒ DELETE

NAME BEZOLD, THOMAS
STREET ADDRESS 3250 MARY STREET, 5TH FLOOR
CITY-ST-ZIP MIAMI FL 33133

TITLE VAS ☒ DELETE

NAME HEWITT, THOMAS F
STREET ADDRESS 3250 MARY STREET, 5TH FLOOR
CITY-ST-ZIP MIAMI FL 33133

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE CEO ☐ Change ☐ Addition

1.2 NAME James D. Carreker
1.3 STREET ADDRESS 1950 Stemmons Frwy #6001
1.4 CITY-ST-ZIP Dallas, Texas 75207

2.1 TITLE President ☐ Change ☐ Addition

2.2 NAME Leslie V. Bentley
2.3 STREET ADDRESS 1950 Stemmons Frwy #6001
2.4 CITY-ST-ZIP Dallas, Texas 75207

3.1 TITLE Treasurer ☐ Change ☐ Addition

3.2 NAME Lawrence S. Jones
3.3 STREET ADDRESS 1950 Stemmons Frwy #6001
3.4 CITY-ST-ZIP Dallas, Texas 75207

4.1 TITLE Secretary ☐ Change ☐ Addition

4.2 NAME Carla S. Moreland
4.3 STREET ADDRESS 1950 Stemmons Frwy #6001
4.4 CITY-ST-ZIP Dallas, Texas 75207

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify 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 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:

Lawrence S. Jones
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Lawrence S. Jones, Treas

214/863-1000

Date

Daytime Phone #

CR2E034 (11/98)