

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000055137

FILED  
Mar 16, 2006  
Secretary of State

Entity Name: SOUTH FLORIDA FACILITIES CORPORATION

## Current Principal Place of Business:

19612 S.W. 69TH PLACE  
FORT LAUDERDALE, FL 33332

## New Principal Place of Business:

100 CRESCENT COURT  
SUITE 1200  
DALLAS, TX 75201

## Current Mailing Address:

19612 S.W. 69TH PLACE  
FORT LAUDERDALE, FL 33332

## New Mailing Address:

100 CRESCENT COURT  
SUITE 1200  
DALLAS, TX 75201

FEI Number: 65-0853664

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BERGERON, LOMMIE N  
19612 S.W. 69TH PLACE  
FORT LAUDERDALE, FL 33332 US

## Name and Address of New Registered Agent:

BSPA CORPORATE SERVICES, INC.  
350 E. LAS OLAS BOULEVARD  
SUITE 1000  
FORT LAUDERDALE, FL 33301 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: ROBERT W. BARRON, VP

03/16/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: WORKMAN, B T  
Address: 19612 S.W. 69TH PLACE  
City-St-Zip: FORT LAUDERDALE, FL 33332

Title: D ( ) Delete  
Name: BERGERON, LONNIE N  
Address: 19612 S.W. 69TH PLACE  
City-St-Zip: FORT LAUDERDALE, FL 33332

Title: D (X) Delete  
Name: BERGERON, RONALD M JR.  
Address: 19612 S.W. 69TH PLACE  
City-St-Zip: FORT LAUDERDALE, FL 33332

Title: D (X) Delete  
Name: BERGERON, RONALD M SR.  
Address: 19612 S.W. 69TH PLACE  
City-St-Zip: FORT LAUDERDALE, FL 33332

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: SAVOLDELLI, PAUL  
Address: 1550 BISCAYNE BLVD.  
City-St-Zip: MIAMI, FL 33132

Title: DV (X) Change ( ) Addition  
Name: ARMES, JOSEPH B  
Address: 100 CRESCENT COURT  
City-St-Zip: DALLAS, TX 75201

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOSEPH B. ARMES

EVP

03/16/2006

Electronic Signature of Signing Officer or Director

Date