

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

**FILED**  
**Mar 10 1997 8:00am**  
**Secretary of State**

PROFIT CORPORATION  
 ANNUAL REPORT  
**1997**



FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**  
 Secretary of State  
 DIVISION OF CORPORATIONS

**DOCUMENT # V47247 (4)**  
 1. Corporation Name  
**101 PROPERTIES CORP.**



Principal Place of Business: **200 S. ANDREWS AVE. BOCA RATON FL 33301 US**  
 Mailing Address: **200 S. ANDREWS AVE. FT. LAUDERDALE FL 33301-1864 US**

3. Date Incorporated or Qualified: **07/01/1992**      3a. Date of Last Report: **04/30/1996**  
 4. FEI Number: **65-0352334**      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 has liability for intangible tax under s. 199.032, Florida Statutes:  Yes  No

2. Principal Place of Business: **21 1201 Elm Street**      2a. Mailing Address: **26 SAME**  
 Suite, Apt. #, etc.  
 22 City & State: **23 Dallas, TX**      27 City & State  
 24 Zip: **75270**      25 Country: **USA**      29 Zip:      30 Country:

9. Name and Address of Current Registered Agent: **THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301**  
 10. Name and Address of New Registered Agent: **81 Name: 82 Street Address (P.O. Box Number is Not Acceptable): 700002108697 83 City: -03/10/97--01051-0005 Zip Code: \*\*\*1815.00 FL**

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: \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: <b>PD</b>	NAME: <b>FIELDS, BILL</b>	1.1 TITLE:	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS: <b>200 S. ANDREWS AVE.</b>	CITY-ST-ZIP: <b>FT. LAUDERDALE FL 33301</b>	1.2 NAME:	
TITLE: <b>EVP</b>	NAME: <b>HAWKINS, THOMAS W</b>	1.3 STREET ADDRESS: <b>1201 Elm Street</b>	1.4 CITY-ST-ZIP: <b>Dallas, TX 75270</b>
STREET ADDRESS: <b>200 S. ANDREWS AVE.</b>	CITY-ST-ZIP: <b>FORT LAUDERDALE FL 33301</b>	2.1 TITLE: <b>Ex. V.P.</b>	2.2 NAME: <b>Adam Phillips</b>
TITLE: <b>EVP</b>	NAME: <b>BYRNE, THOMAS C</b>	2.3 STREET ADDRESS: <b>1201 Elm St.</b>	2.4 CITY-ST-ZIP: <b>Dallas, TX 75270</b>
STREET ADDRESS: <b>200 S. ANDREWS AVE.</b>	CITY-ST-ZIP: <b>FT. LAUDERDALE FL 33301</b>	3.1 TITLE: <b>Vice Chairman</b>	3.2 NAME: <b>1201 Elm Street</b>
TITLE: <b>SVP</b>	NAME: <b>PHILLIPS, JOE</b>	3.3 STREET ADDRESS: <b>Dallas, TX 75270</b>	4.1 TITLE: <b>Ex. V.P.</b>
STREET ADDRESS: <b>200 S. ANDREWS AVE.</b>	CITY-ST-ZIP: <b>FT. LAUDERDALE FL 33301</b>	4.2 NAME: <b>Gary Petersen</b>	4.3 STREET ADDRESS: <b>1201 Elm Street</b>
TITLE: <b>VP</b>	NAME: <b>HALACY, MARK</b>	4.4 CITY-ST-ZIP: <b>Dallas, TX 75270</b>	5.1 TITLE: <b>Ex. V.P.</b>
STREET ADDRESS: <b>200 S. ANDREWS AVE.</b>	CITY-ST-ZIP: <b>FT. LAUDERDALE FL 33301</b>	5.2 NAME: <b>Mark Gilman</b>	5.3 STREET ADDRESS: <b>1201 Elm St.</b>
TITLE: <b>AS</b>	NAME: <b>SHAFFER, MARCI</b>	5.4 CITY-ST-ZIP: <b>Dallas, TX 75270</b>	6.1 TITLE: <b>Ex. V.P.</b>
STREET ADDRESS: <b>200 S. ANDREWS AVENUE</b>	CITY-ST-ZIP: <b>FORT LAUDERDALE FL 33301</b>	6.2 NAME: <b>3.10.97</b>	6.3 STREET ADDRESS: <b>1201 Elm St.</b>
		6.4 CITY-ST-ZIP: <b>Dallas, TX 75270</b>	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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.

SIGNATURE: **Marci Shaffer, Asst. Sec. 3/4/97 954-832-3000**

CRE034 (9/96)