

2007 FOR PROFIT CORPORATION ANNUAL REPORT


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Feb 21, 2007 8:00 am
Secretary of State

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01052007 Chg-P CR2E034 (12/06)

DOCUMENT # 321779			
1. Entity Name UNIVERSITY CLUB, INC.			
Principal Place of Business 3030 LBJ FREEWAY DALLAS, TX 75234 US		Mailing Address P O BOX 819087 % TAX DEPT DALLAS, TX 75381 US	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		City	FL Zip Code
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	P <input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HOWE, DOUGLAS	NAME	<i>ERIC AFFELOT</i>
STREET ADDRESS	3030 LBJ FREEWAY, SUITE 700	STREET ADDRESS	
CITY-ST-ZIP	DALLAS, TX 75234	CITY-ST-ZIP	
TITLE	V <input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LARGENT, DAVID	NAME	<i>DAVID WOODYARD</i>
STREET ADDRESS	3030 LBJ FREEWAY, SUITE 700	STREET ADDRESS	
CITY-ST-ZIP	DALLAS, TX 75234	CITY-ST-ZIP	
TITLE	V <input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TAYLOR, RON	NAME	<i>ANGELA STEPHENS</i>
STREET ADDRESS	3030 LBJ FREEWAY, SUITE 700	STREET ADDRESS	
CITY-ST-ZIP	DALLAS, TX 75234	CITY-ST-ZIP	
TITLE	S <input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HENSLEE, THOMAS	NAME	<i>RAND HUGUELY</i>
STREET ADDRESS	3030 LBJ FREEWAY, SUITE 700	STREET ADDRESS	
CITY-ST-ZIP	DALLAS, TX 75234	CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <i>[Signature]</i>		Date: <i>02/01/07</i> Daytime Phone #: <i>972-243-6191</i>	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			