


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2004 8:00 am
Secretary of State

04-28-2004 90208 018 ***150.00


DOCUMENT # F69880
 1. Entity Name
CENTRE CLUB, INC.



Principal Place of Business 3030 LBJ FRWY 700 P.O. BOX 819087 DALLAS, TX 75381	Mailing Address 3030 LBJ FRWY 700 P.O. BOX 819087 DALLAS, TX 75381
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DO NOT WRITE IN THIS SPACE

14009669



01152004 No Chg-P CR2E034 (10/03)

4. FEI Number 75-1843838	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
 1201 HAYS STREET
 TALLAHASSEE, FL 32301-2525

DO NOT WRITE IN THIS SPACE

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 _____ (NOTE: Registered Agent signature required when reinstating.) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP HOWE, DOUGLAS 3030 LBJ FRWY 700 DALLAS, TX
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD LARGENT, DAVID 3030 LBJ FRW #700 DALLAS, TX
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S HENSLEE, THOMAS 3030 LBJH FRWY 700 DALLAS, TX
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T TAYLOR, RON 3030 LBJH FRWY 700 DALLAS, TX
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. 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 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:  **Ron Taylor** **3/18/04** **972-243-6191**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #