2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2005 08:00 AM
Secretary of State

DOCUMENT # F99000003 1. Entity Name LINCOLN NO. 2340, INC.		
Principal Place of Business P.O. BOX 1920 DALLAS, TX 75221	Mailing Address P.O. BOX 1920 DALLAS, TX 75221	

04182005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 75-2832319 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CIT CORPORATION SYSTEM DO NOT WRITE 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating) DATE \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10, TITLE CD NAME POGUE, MACK STREET ADDRESS 500 N. AKARD, SUITE 3300 C!TY-ST-ZIP DALLAS, TX 75201 U00000332455 DP 04/26/05-80058-025 150.00 TITLE BYRNE, TIMOTHY NAME STREET ADDRESS 500 N. AKARD, SUITE 3300 CITY-ST-7IP DALLAS, TX 75201 VP ----TITLE JACKS, DAN NAME 500 N. AKARD, SUITE 3300 STREET ADDRESS DO NOT WRITE CITY-ST-ZIP DALLAS, TX 75201 TITLE ST IN THIS SPACE DAVIS, NANCY A NAME STREET ADDRESS 500 N. AKARD, SUITE 3300 CITY-ST-ZIP DALLAS, TX 75201 TITLE NAME SHALLOT, CHARLES O 3159 ROYAL DRIVE SUITE 200 STREET ADDRESS CITY-ST-ZIP ALPHARETTA, GA 30022 TITLE STREITT, DENNIS NAME 500 N AKARD, STE 3300 STREET ADDRESS CITY-ST-ZIP DALLAS, TX 75201

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 turther 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 this an address, with all other like empowered.

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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Dennis Streit
Vice PresidentAssistant Secretary

4-19-05

214-740-4440