

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000018079

FILED
Apr 10, 2008
Secretary of State

Entity Name: 2039 WILSON BOULEVARD INC.

Current Principal Place of Business:

1801 HERMITAGE BOULEVARD
SUITE 600
TALLAHASSEE, FL 32308

New Principal Place of Business:

Current Mailing Address:

1801 HERMITAGE BOULEVARD
SUITE 600
TALLAHASSEE, FL 32308

New Mailing Address:

FEI Number: 75-2584804 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DVS () Delete
Name: GRAY, LYNNE M
Address: 1801 HERMITAGE BLVD SUITE 600
City-St-Zip: TALLAHASSEE, FL 32308

Title: P () Delete
Name: FARALDO, MARK P
Address: 8750 N CENTRAL EXPRESSWAY SUITE 800
City-St-Zip: DALLAS, TX 75231

Title: VPAS () Delete
Name: SMITH, ERIC R
Address: 8750 N CENTRAL EXPRESSWAY SUITE 800
City-St-Zip: DALLAS, TX 75231

Title: TAS () Delete
Name: HANSON, JENNIFER A
Address: 8750 N CENTRAL EXPRESSWAY, STE 800
City-St-Zip: DALLAS, TX 75231

Title: D () Delete
Name: BENNETT, DOUGLAS
Address: 1801 HERMITAGE BLVD STE 600
City-St-Zip: TALLAHASSEE, FL 32308

Title: DVP () Delete
Name: SMITH, JEFFREY L
Address: 1081 HERMITAGE BLVD STE 600
City-St-Zip: TALLAHASSEE, FL 32308

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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 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: JENNIFER A. HANSON

TAS

04/10/2008

Electronic Signature of Signing Officer or Director

_____ Date