## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

1. Entity Nam	ne	# 853634 ESSIONAL PROPEI		FILED 07 APR -3 PM 3: 56						
Principal Plac 13737 NOEL STE 100 DALLAS, TX	. ROAD	s JS	Mailing Address 13737 NOEL ROAD STE 100 DALLAS, TX 75240 US			SECIALITA I OF STATE TALLAHASSEE, FLORIDA				
2. Principal P	lace of Busin	ness - No P.O. Box #	3. Mailing Address							
Suite, Apt. #, etc.			Suite, Apt. #, etc.			01122007	Chg-P	CR2E03	34 (12/06) _	
City & State			City & State		4. FEI Numb 93-356			_ <del>                                    </del>	plied For t Applicable	
Zip	Country		Zip Count		try	5. Certificate	of Status Desired		8.75 Add ee Required	
	6. Name	and Address of Current F	legistered Agent Name			7. Name and Address of New Registered Agent				
CT CORPO 1200 SOU PLANTATI	TH PINE I	SLAND ROAD			P.O. Box Numb	er is Not Acceptable	)			
					City			FL	Zip Code	3
	named entitions of regist		the purpose of changing its	ed office or register	ed agent, or bo	th, in the State of Flor		 amiliar with, .	and accept	
SIGNATURE										
Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating)  DATE										
FILE NOW!!! FEE IS \$150.00  After May 1, 2007 Fee will be \$550.00  9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.   Added to Fees										
10.		OFFICERS AND D	DIRECTORS	11.		ADDITIONS,	CHANGES TO OFFI	CERS AND	DIRECTORS	S IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	13737 NC	CAITLIN M PEL ROAD, SUITE 100 TX 75240	☐ Delete			1 04.21	0009 <b>6</b> 3 1/0701003		□ Change □ 1  **150	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		GARRY L EL ROAD TX 75240	☐ Delete			34 <b>. 1</b> 4. 4.	** ***********************************		☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	13737 NO	N, JEFFREY S EL ROAD, SUITE 100 TX 75240	Delete	1					Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		RISTINA A EL ROAD, SUITE 100 TX 75240	☐ Delete						Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete						☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete						Change	Addition
12. Thereby 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 notify that I am accellance director of the corporation or changed, or on an a Kristina A. Mack, Asst Sec, 3/28/07  SIGNATURE:  Kristina A. Mack, Asst Sec, 3/28/07  Phone 469-893-2701										