2005 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2005

FILED Mar 08, 2005 08:00 AM Secretary of State

1. Entity Nam	8	# B930000 91 LIMITED PA				Secretary of State
Principal Place of Business 2100 MCKINNEY AVE., STE. 700 DALLAS, TX 75201			Mailing Address 2100 MCKINNEY AVE., STE. 700 DALLAS, TX 75201		00	T SUMMINENT HOSE HEIGHT HINDL BENLIN MENIN MENIN WENN WASHI HENNI HENNI WENTAN DE LEGE
2. Principal P	lace of Busin	ness	3. Mailing Address			
Suite, Apt. #, etc.			Suite, Apt. #, etc.			01062005 Chg-LP CR2E003 (10/03)
City & State	9		City & State			4. FEI Number Applied For 75-2487203 Not Applicable
Zip		Country	Zip	Cour	ntry	5. Certificate of Status Desired S8.75 Additional Fee Required
	6. Name	and Address of Cur	rent Registered Agent	···	Name	7. Name and Address of New Registered Agent
1201 HAYS	CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525					(P.O. Box Number is Not Acceptable)
	JOEL, 1 E	02001-2020			City	FL Zip Code
	named entitions of regist		ent for the purpose of changing	its register	red office or regist	ered agent, or both, in the State of Florida. I am familiar with, and accept
SIGNATURE -	Signature, Mad	or printed name of registered	econt and title if poplicable.			DATE
9. Capital Co as Shown	ntributions		10. Amount of Ca in FLORIDA to		butions	
	A C	ENERAL PARTN	R THAT IS A BUSINESS	ENTITY N	JUST BE REGIS	STERED AND ACTIVE WITH THIS OFFICE. ent must be filed to change a general partner.
12.			THER INFORMATION	13.		ADDRESS CHANGES ONLY
DOCUMENT # F97000001732 NAME CROW FÄMILY, INC.				STR	EET ADDRESS	
STREET ADDRESS CITY-ST-ZIP	2100 MCI	KINNEY AVE., STE TX_75201	. 700	cm	Y-ST-ZIP	
DOCUMENT # NAME					EET ADDRESS	U00000255289
STREET ADDRESS CITY-ST-ZIP	CITY-SI-ZIP			CIT	Y-ST-ZIP	
DOCUMENT # NAME	NAME			STA	REET ADDRESS	
STREET ADDRESS CITY-ST-ZIP				СІТ	Y-ST-ZIP	
NAME STREET ADDRESS	NAME			STE	REET ADDRESS	
CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·		CIT	Y-ST-ZIP	
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP				STR	REET ADDRESS	
GITY-ST-ZIP			40	(en ala	Y-ST-ZIP	
DOCUMENT / NAME STREET ADDRESS				1	Y-ST-ZIP	
indicated the receiv	on this repo ver or trustee ily 1991 ow Famil	rt is true and accurate empowered to execu- Limited Parts	e and that my signature shall ha ite this report as requires by Ci	for the exi	emotion stated in 5	Section 119.07(3)(i), Florida Statutes. I further certify that the information f made under oath; that I am a General Partner of the limited partnership or 2-28-05 214-661-8000
CIGINAL	J. (L	SIGNATURE AND TYP	ED OR PRINTED NAME OF SIGNING GE		. Vice-Pres	Data Dayuro Prone #