

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2007 08:00 A
Secretary of State

DOCUMENT # F01000002964 1. Entity Name POMPAÑO INDUSTRIAL CENTER, INC.	
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Principal Place of Business 13155 NOEL ROAD, SUITE 500 DALLAS, TX 75240	Mailing Address 13155 NOEL ROAD, SUITE 500 DALLAS, TX 75240
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04162007 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 33-0965575	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

C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION, FL 33324

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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

**Filing Fee is \$61.25
 Due by May 1, 2007**

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

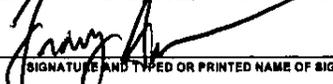
10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD FARMER, DAVID N 13155 NOEL ROAD, SUITE 500 DALLAS, TX 75240
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RIDLEY, DAVID 13155 NOEL ROAD, SUITE 500 DALLAS, TX 75240
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS RAGSDALE, RONALD 13155 NOEL ROAD, SUITE 500 DALLAS, TX 75240
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VAS JOHNSON, KEVIN 13155 NOEL ROAD, SUITE 500 DALLAS, TX 75240
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VAS KIBRY, MICHAEL 13155 NOEL ROAD, SUITE 500 DALLAS, TX 75240
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TAS GREEN, TRACY 13155 NOEL ROAD, SUITE 500 DALLAS, TX 75240

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U00000715495
 04/27/07-80067-025 61.25

12. I hereby 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 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 617, 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:  **Tracy Green-Treasurer** 4/16/07 972-715-7400
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #