

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000004500

FILED
Apr 27, 2006
Secretary of State

Entity Name: BROADWING FINANCIAL SERVICES, INC.

Current Principal Place of Business:

1122 CAPITAL OF TEXAS HIGHWAY S
AUSTIN, TX 78746

New Principal Place of Business:

Current Mailing Address:

1122 CAPITAL OF TEXAS HIGHWAY S
AUSTIN, TX 78746

New Mailing Address:

FEI Number: 36-4386768

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: PCEO () Delete
Name: HUBER, DAVID
Address: 1122 CAPITAL OF TEXAS HWY SOUTH
City-St-Zip: AUSTIN, TX 78746

Title: VCFO () Delete
Name: ANDERSON, LYN
Address: 1122 CAPITAL OF TEXAS HWY SOUTH
City-St-Zip: AUSTIN, TX 78746

Title: VGCS () Delete
Name: LARSEN, KIM
Address: 1122 CAPITAL OF TEXAS HWY SOUTH
City-St-Zip: AUSTIN, TX 78746

Title: VT () Delete
Name: DEC, TIMOTHY
Address: 1122 CAPITAL OF TEXAS HWY SOUTH
City-St-Zip: AUSTIN, TX 78746

Title: VAS () Delete
Name: ROBERTS, DAVID MACE
Address: 1122 CAPITAL OF TEXAS HWY SOUTH
City-St-Zip: AUSTIN, TX 78746

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
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 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: DAVID ROBERTS

VAS

04/27/2006

Electronic Signature of Signing Officer or Director

_____ Date