


2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 29, 2004 08:00 AM
Secretary of State

DOCUMENT # F02000005470	
1. Entity Name LINCOLN NO. 2108, INC.	

Principal Place of Business P.O. BOX 1920 DALLAS TX 75221	Mailing Address P.O. BOX 1920 DALLAS TX 75221
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



MOORE CR2E034 (11/03)

4. FEI Number 16-1635862		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		City	
		FL	Zip Code

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 _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	PD	TITLE	
NAME	BYRNE, TIMOTHY	NAME	
STREET ADDRESS	1505 FEDERAL STREET	STREET ADDRESS	
CITY - ST - ZIP	DALLAS TX 75201	CITY - ST - ZIP	
TITLE	V	TITLE	
NAME	JACKS, DAN	NAME	
STREET ADDRESS	1505 FEDERAL STREET	STREET ADDRESS	
CITY - ST - ZIP	DALLAS TX 75201	CITY - ST - ZIP	
TITLE	ST	TITLE	
NAME	DAVIS, NANCY	NAME	
STREET ADDRESS	1505 FEDERAL STREET	STREET ADDRESS	
CITY - ST - ZIP	DALLAS TX 75201	CITY - ST - ZIP	
TITLE	CD	TITLE	
NAME	POGUE, MACK	NAME	
STREET ADDRESS	1505 FEDERAL STREET	STREET ADDRESS	
CITY - ST - ZIP	DALLAS TX 75201	CITY - ST - ZIP	
TITLE	VPAS	TITLE	
NAME	STREIT, DENNIS	NAME	
STREET ADDRESS	1505 FEDERAL ST	STREET ADDRESS	
CITY - ST - ZIP	DALLAS TX 75201	CITY - ST - ZIP	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY - ST - ZIP		CITY - ST - ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 607, 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:  **Dennis Streit**
Vice President - Assistant Secretary
Date: **4-26-04** Daytime Phone #: **214-740-4440**