## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 26, 2005 08:00 AM Secretary of State

DOCUMENT # F0300000498  1. Entity Name LINCOLN NO. 2105, INC.	
Principal Place of Business Mailing Address 1505 FEDERAL STREET PO BOX 1920 DALLAS, TX 75201 DALLAS, TX 75201	

Principal Plac 1505 FEDER DALLAS, TX	AL STREET 75201 E		E	) igning in galeg ma	Chg-P CR2E	E034 (10/03)  Applied For Not Applicable \$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				DO NOT WRITE IN THIS SPACE			
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 little if applicable  FILE NOW!!! FEE IS \$150.00  9. Election Campaign Financing  Trust Fund Contribution,  After May 1, 2005 Fee will be \$550.00  Trust Fund Contribution,							
10. TITLE NAME STREET ADDRESS GITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRECT  CD POGUE, MACK 500 N. AKARD STE. 3300  DALLAS, TX 75201  DP BYRNE, TIMOTHY 500 N. AKARD STE. 3300  DALLAS, TX 75201	DTORS			U000003324	52 8-023 150.90	
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPS JACKS, DAN 500 N. AKARD STE. 3300 DALLAS, TX 75201 SVPT DAVIS, NANCY 500 N. AKARD STE. 3300 DALLAS, TX 75201			DO NO	T WRIT	Έ	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12.   hereby	VPAS STREIT, DENNIS 500 N. AKARD, SUITE 3300 DALLAS, TX 75201  certify that the information supplied with this fon this report or supplemental report is true	lling does not qualify for the exem	ption stated in Se	action 119.07(3)(i), Floridi	a Statutes. I further c	ertify that the information	

Thereby destript that the information supplied with this lining does not quality for the exemption stated in Section 19.07(3)(i), Horiza 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 legial effect as if made under oath; that I am an officer of 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.

Dennis Streit

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Vice President-Assistant Secretary

4-19-05

214-740-4440