2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Jan 30, 2006 8:00 am Secretary of State

1. Entity Name	MENT #F040000012					01-30-20	06 90061 C	109 ****61	.25	
Principal Place 701 HIGHLAN ARLINGTON, T		Mailing Address 701 HIGHLANDER BLVD ARLINGTON, TX 76015			(60009(968			
	•									
2. Principal Pt	ace of Business	3. Mailing Address								
701 Highlander Blvd. Suite. Apt. #, etc.		701 Highlander Blvd. Suite, Apt. #, etc.								
Suite 400	·	Suite 400		l	01242006	Chg-NP	CR2E	37 (11/05)		
City & State		City & State			4. FEI Number 75-219	er 0667		<u> </u>	oplied For	
Arlington		Arlington, TX	Country		75-219				ot Applicable	
Zip 7 6015	Country USA	Zip 76015	Country USA		5. Certificate	of Status Desir	ed 🗌	\$8.75 Add Fee Require		
	6. Name and Address of Current R				7. Name and	Address of N	ew Registered	Agent		
CORRORA	TE OPERTIONS NETWORK IN		Name							
CORPORATE CRESTIONS NETWORK, INC. 11380 PROSPERITY FARMS ROAD			Street A	Street Address (P.O. Box Number is Not Acceptable)						
#221 E	OU CARRENO EL 2014O A C	•					· · · · · · ·			
PALM BEA	CH GARDENS, FL 33410 🏌							1 2 2		
			City				F	L Zip C∞	10	
SIGNATURE -										
	Signature, typed or printed name of registered agent an	 _	Registered Agent signation	Desuper eru		Se l	Make che	ck payable t	<u> </u>	
	Signature, typed or printed reame of registered agent an Filling Fee is \$61.25 Due by May 1, 2006	 _	npaign Financing	Descripes end	\$5.00 May E Added to Fees					
10.	Filing Fee is \$61.25 Due by May 1, 2006 OFFICERS AND DIRE	9. Election Carr Trust Fund C	npaign Financing		\$5.00 May E		Make che Florida Depa	artment of S	itate	
10.	Filing Fee is \$61.25 Due by May 1, 2006 OFFICERS AND DIRE	9. Election Carr Trust Fund C	npaign Financing contribution.	S/D	\$5.00 May E Added to Fees	ANGES TO OF	Make che Florida Depa	artment of S	itate	
10.	Filing Fee is \$61.25 Due by May 1, 2006 OFFICERS AND DIRE PC /D MALONE, JEFF	9. Election Cam Trust Fund C ECTORS	npaign Financing contribution.	S/D KATO	\$5.00 May E Added to Fees ADDITIONS/CH	ANGES TO OF	Make che Florida Depa	artment of S	N 10	
10. TITLE NAME	Filing Fee is \$61.25 Due by May 1, 2006 OFFICERS AND DIRE	9. Election Cam Trust Fund C ECTORS	npaign Financing Contribution. 11. TITLE NAME	S/D KATO 300 N	\$5.00 May E Added to Fees	ANGES TO OF GE SUITE 350	Make che Florida Depa	artment of S	N 10	
10. TITLE NAME STREET ADDRESS	Filing Fee is \$61.25 Due by May 1, 2006 OFFICERS AND DIRE PC /D MALONE, JEFF 701 HIGHLANDER BLVD SUITE	9. Election Cam Trust Fund C ECTORS Delete 400	npaign Financing Contribution. 11. TITLE NAME STREET ADDRESS	S/D KATO 300 N RICH/ T/D DAILE	\$5.00 May B Added to Fees ADDITIONS/CH SIC, GEOR . COIT RD.	ANGES TO OF GE SUITE 350 X 75080	Make che Florida Depa	artment of S	N 10	
TIO. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Filing Fee is \$61.25 Due by May 1, 2006 OFFICERS AND DIRE PC /D MALONE, JEFF 701 HIGHLANDER BLVD.SUITE ARLINGTON, TX 760154399 V /D GORMAN, LAURA	9. Election Cam Trust Fund C ECTORS Delete 400	npaign Financing Contribution. 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	S/D KATO 300 N RICH/ T/D DAILE 2867 I	\$5.00 May E Added to Fees ADDITIONS/CH SIC, GEOR COIT RD. ARDSON, T	ANGES TO OF GE SUITE 350 X 75080 T D CIRCLE	Make che Florida Depa	DIRECTORS IN Change	N 10 Addition	
TIO. TITLE NAME STREET ADDRESS GIY-ST-ZIP TITLE NAME STREET ADDRESS CIY-SI-ZIP TITLE	Filing Fee is \$61.25 Due by May 1, 2006 OFFICERS AND DIRE PC /D MALONE, JEFF 701 HIGHLANDER BLVD.SUITE ARLINGTON, TX 760154399 V /D GORMAN, LAURA 701 HIGHLANDER BLVD.SUITE ARLINGTON, TX 760154399 V	9. Election Cam Trust Fund C ECTORS Delete 400	npaign Financing contribution. 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME TITLE	S/D KATO 300 N RICH/ T/D DAILE 2867 I ARLIN	\$5.00 May E Added to Fees ADDITIONS/CH SIC, GEOR COIT RD. ARDSON, T EY, ROBER INNISWOOI	ANGES TO OF GE SUITE 350 X 75080 T D CIRCLE	Make che Florida Depa	DIRECTORS IN Change	N 10 Addition	
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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 (

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(817) 468-0400

Daytme Phone #