

2007 FOR PROFIT CORPORATION
ANNUAL REPORT

FILED
Apr 17, 2007 8:00 am
Secretary of State

04-17-2007 90244 037 ***150.00

DOCUMENT # F05000004767 1. Entity Name SILVERLEAF FINANCE II, INC.					
Principal Place of Business 1221 RIVER BEND DRIVE, SUITE 120 DALLAS, TX 75247			Mailing Address 1221 RIVER BEND DRIVE, SUITE 120 DALLAS, TX 75247		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State Zip Country		City & State Zip Country		4. FEI Number 20-0371784	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent CAPITOL CORPORATE SERVICES, INC. 155 OFFICE PLAZA DR. SUITE A TALLAHASSEE, FL 32301			7. Name and Address of New Registered Agent 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MEAD, ROBERT E 1221 RIVER BEND DRIVE, SUITE 120 DALLAS, TX 75247	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BURT, CHRISTOPHER T 114 W. 47TH STREET, SUITE 1715 NEW YORK, NY 10036	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S CEARLEY, SANDRA G 1221 RIVER BEND DRIVE, SUITE 120 DALLAS, TX 75247	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD WHITE, HARRY J JR. 1221 RIVER BEND DRIVE, SUITE 120 DALLAS, TX 75247	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRAYFIELD, SHARON K 1221 RIVER BEND DRIVE, SUITE 120 DALLAS, TX 75247	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D O'CONNOR, TIMOTHY 114 W. 47TH STREET, SUITE 1715 NEW YORK, NY 10036	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD Angelo Clementi 114 W. 47th Street, Suite 1715 New York, NY 10036				
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 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: <i>Sandra Cearley</i> Corporate Secretary 3/27/07 214-631-1166 x.2214 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					

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