

**FILED**  
**Feb 07, 2008 8:00 am**  
**Secretary of State**

DOCUMENT # F06000000799

**Mailing Address**  
5580 PETERSON LANE SUITE 250  
DALLAS, TX 75240

### 3. Mailing Address

Suite, Apt. #, etc.

City &amp; State

Country

01112008 Chg-NP CR2E037 (12/06)

4. FEI Number  
56-2536161

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**9. Election Campaign Financing Trust Fund Contribution.**

**\$5.00** May Be  
Added to Fees

**Make check payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

☐ Delete Delete☐ Delete

 Delete

☐ Delete

 Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

☒ Change☒ Change☒ Change☐ Change☐ Change

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

Date \_\_\_\_\_

Daytime Phone #