

93352

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED

**Apr 28, 2006 08:00 AM
Secretary of State**

DOCUMENT # F95000003519 1. Entity Name LINCOLN PROPERTY COMPANY COMMERCIAL SERVICE ENTERPRISES, INC.					
Principal Place of Business 1505 FEDERAL ST. DALLAS TX 75201			Mailing Address P O BOX 1920 DALLAS TX 75221 US		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Zip		Country	
6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City	



1st MOORE CR2E034 (10/05)

4. FEI Number **75-2457016** Applied For ☐ Not Applicable ☐

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

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 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	CD <input type="checkbox"/> Delete	TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
NAME	POGUE, MACK	NAME	
STREET ADDRESS	1505 FEDERAL ST.	STREET ADDRESS	
CITY-ST-ZIP	DALLAS TX 75201	CITY-ST-ZIP	
TITLE	DP <input type="checkbox"/> Delete	TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
NAME	DUVALL, WILLIAM C	NAME	
STREET ADDRESS	1505 FEDERAL ST.	STREET ADDRESS	
CITY-ST-ZIP	DALLAS TX 75201	CITY-ST-ZIP	
TITLE	VST <input type="checkbox"/> Delete	TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
NAME	DAVIS, NANCY A	NAME	
STREET ADDRESS	1505 FEDERAL ST.	STREET ADDRESS	
CITY-ST-ZIP	DALLAS TX	CITY-ST-ZIP	
TITLE	AS <input type="checkbox"/> Delete	TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
NAME	EVERETT, LEIGH A	NAME	
STREET ADDRESS	1505 FEDERAL ST	STREET ADDRESS	
CITY-ST-ZIP	DALLAS TX 75201	CITY-ST-ZIP	
TITLE	V <input type="checkbox"/> Delete	TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
NAME	BEALL, WEBBER	NAME	
STREET ADDRESS	1505 FEDERAL ST.	STREET ADDRESS	
CITY-ST-ZIP	DALLAS TX 75201	CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

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05/11/06-80045-010 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: *Leigh Ann Everett* **Leigh Ann Everett**
Assistant Secretary 4-24-06 214-740-4440

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR