


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 01, 2006 08:00
Secretary of State

DOCUMENT # F95000003865


1. Entity Name
GAEDEKE MANAGEMENT, INC.



Principal Place of Business Mailing Address

3710 RAWLINS STREET., STE 1000, LB #24 3710 RAWLINS STREET., STE 1000, LB #24
 DALLAS, TX 75219 DALLAS, TX 75219

DO NOT WRITE IN THIS SPACE



07172006 No Chg-P CR2E034 (11/05)

4. FEI Number 75-2633627	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 Due by September 6, 2006

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVP LICKSTEIN, GLENN S. 3710 RAWLINS STREET, SUITE 1000, LB # 24- DALLAS, TX 75219
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCEO STENER, SABINE 3710 RAWLINS STREET, SUITE 1000, LB #2 DALLAS, TX 75219
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVP REED, MARK H 3710 RAWLINS STREET, SUITE 1000, LB #2 DALLAS, TX 75219
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V FETTER, KIRK R 3710 RAWLINS STREET, SUITE 1000, LB #2 DALLAS, TX 75219
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000573013
 08/01/06-80010-004 158.75

DO NOT WRITE IN THIS SPACE

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: SABINE STENER, PRESIDENT 07.24.06 214.528.8883

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #