


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 13, 2006 8:00 am**  
**Secretary of State**

02-13-2006 90029 039 \*\*\*150.00

<b>DOCUMENT # F95000006230</b>	
1. Entity Name <b>SOWAMCO XX OF TEXAS, INC.</b>	

Principal Place of Business <b>6400 IMPERIAL DRIVE PO BOX 8216 WACO, TX 76712-8216</b>	Mailing Address <b>6400 IMPERIAL DRIVE PO BOX 8216 WACO, TX 76712-8216</b>
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

40015100



01092006 Chg-P CR2E034 (11/05)

4. FEI Number <b>74-2729018</b>	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
<b>C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324</b>		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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CCOB HAWKINS, JAMES R 6400 IMPERIAL DRIVE WACO, TX 767128216 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Senior Vice President <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Richard J. VanderWoude 6400 Imperial Drive Waco, TX 76712-8216
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SARTAIN, JAMES T 6400 IMPERIAL DRIVE WACO, TX 767128216 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	President; Chairman <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition James T Sartain 6400 Imperial Drive Waco, TX 76712-8216
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVP DEWITT, TERRY 6400 IMPERIAL DRIVE WACO, TX 767128216 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S RAY, MARGIE 6400 IMPERIAL DRIVE WACO, TX 767128216 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Lotte Bastick 6400 Imperial Drive Waco, TX 76712-8216
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVP GREAK, JOE S 6400 IMPERIAL DRIVE WACO, TX 767148216 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TSVP HOMES, JAMES C 6400 IMPERIAL DR WACO, TX 767128216 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 or empowered.

**SIGNATURE:**  **1/13/06** **(254) 761-2800**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #