## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F9600000020

FORTE OF TEVAO INIO

City-St-Zip:

WINSTON-SALEM, NC 27101

FILED Apr 29, 2007 Secretary of State

| Entity Nai   | me: FORTE                                 | DE TEXAS, INC.                          |   |  |  |
|--|---|---|---|--|--|
| Current Principal Place of Business:   |   |   | New Principal Place                               | New Principal Place of Business:             |  |
| 7600 CHE<br>SUITE 400<br>AUSTIN, T   |   | RIVE                                    |   |  |  |
| Current Mailing Address:   |   |   | New Mailing Address                               | New Mailing Address:                         |  |
| 200 WEST SECOND STREET<br>3RD FLOOR LEGAL, C/O LISA MOBERLY<br>WINSTON-SALEM, NC 27101 |   |   | 7600 CHEVY CHASE<br>SUITE 400<br>AUSTIN, TX 78752 |  |  |
| FEI Number:  | : 74-2760720                              | FEI Number Applied For ( )              | FEI Number Not Applicable ( )                     | Certificate of Status Desired ( )            |  |
| Name and Address of Current Registered Agent:  |   |   | Name and Address o                                | Name and Address of New Registered Agent:    |  |
| 155 OFFIC<br>SUITE A   | CORPORATE<br>DE PLAZA DR.<br>SSEE, FL 323 |   |   |  |  |
|  | named entity<br>e of Florida.             | submits this statement for the p        | ourpose of changing its registered                | d office or registered agent, or both,       |  |
| SIGNATUR   | RE:                                       |   |   |  |  |
| Electronic Signature of Registered Agent   |   |   | ent   | Date   |  |
| Election Car   | mpaign Financin                           | g Trust Fund Contribution ( ).          |   |  |  |
| OFFICERS AND DIRECTORS:  |   |   | ADDITIONS/CHANGE                                  | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:  | VIDRIK, FRANI                             | CHASE DR, STE 400                       | Title:<br>Name:<br>Address:<br>City-St-Zip:       | () Change () Addition                        |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:  | LAMBERT, TH                               | CHASE DR., STE 400                      | Title:<br>Name:<br>Address:<br>City-St-Zip:       | () Change () Addition                        |  |
| Title:<br>Name:<br>Address:  | MOBERLY, LIS                              | ) Delete<br>SA I<br>COND ST., 3RD FLOOR | Title:<br>Name:<br>Address:                       | () Change () Addition                        |  |

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: LISA I MOBERLY 04/29/2007 OTH