2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000006038

Entity Name: DM WEEKLEY, INC.

FILED Apr 16, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Current Frincipal Flace Of Business.	New Fillicipal Flace Of Dusiliess.

1111 N. POST OAK RD.
HOUSTON, TX 77055

1111 NORTH POST OAK ROAD HOUSTON, TX 77055

Current Mailing Address: New Mailing Address:

1111 N. POST OAK RD. 1111 NORTH POST OAK ROAD HOUSTON, TX 77055 HOUSTON, TX 77055

FEI Number: 76-0519103 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 US

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.

SIGNATURE:

City-St-Zip:

Electronic Signature of Registered Agent Date

Citv-St-Zip:

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

HOUSTON, TX 77055

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

HOUSTON, TX 77055

 Title:
 CPT () Delete
 Title:
 P (X) Change () Addition

 Name:
 WEEKLEY, DAVID M
 Name:
 WEEKLEY, DAVID M

 Address:
 1111 N. POST OAK RD.
 Address:
 1111 NORTH POST OAK ROAD

 Address:
 1111 N. POST OAK RD.
 Address:
 1111 NORTH POST OAK ROAD

 City-St-Zip:
 HOUSTON, TX 77055
 City-St-Zip:
 HOUSTON, TX 77055

 Title:
 VS
 () Delete
 Title:
 V
 (X) Change () Addition

 Name:
 WEEKLEY, RICHARD
 Name:
 WEEKLEY, RICHARD W

 Address:
 1111 N. POST OAK RD.
 Address:
 1111 NORTH POST OAK ROAD

I hereby certify that the information supplied with this filing does not qualify for the 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.

SIGNATURE: JOHN BURCHFIELD S 04/16/2007