

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT


**FILED**  
**May 03, 2005 8:00 am**  
**Secretary of State**

05-03-2005 90170 022 \*\*\*150.00

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04272005 Chg-P CR2E034 (10/03)

<b>DOCUMENT # F96000006590</b>					
1. Entity Name CASA MARINA REALTY CORPORATION					
Principal Place of Business 1950 STEMMONS FRWY #6001 DALLAS, TX 75207			Mailing Address 1950 STEMMONS FRWY #6001 DALLAS, TX 75207		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country	Zip		Country
4. FEI Number 23-2869424			Applied For Not Applicable		
5. Certificate of Status Desired <input type="checkbox"/>			\$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent  CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525			7. Name and Address of New Registered Agent 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 _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KLEISNER, FRED 1950 STEMMONS FRWY- #6001 DALLAS, TX 75207 <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	VD TENG, TED 1950 STEMMONS FRWY, STE #6001 DALLAS, TX 75207 <input checked="" 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	VP SMITH, RICK 1950 STEMMONS FRWY, #6001 DALLAS, TX 75207 <input checked="" 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	VP HENDRICK, JUDY 1950 STEMMONS FRWY, #6001 DALLAS, TX 75207 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Judy Hendrick <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1950 Stemmons Frwy #6001 Dallas TX 75207		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS CHLOUPEK, MARK 1950 STEMMONS FRWY. DALLAS, TX 75207 <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	VAS GOSCH, PHILIP 1950 STEMMONS FRWY #6001 DALLAS, TX 75207 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVP Treasurer <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Michael Higgins 1950 Stemmons Frwy #6001 Dallas TX 75207		
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: <u>Michael Higgins</u> SVP/Treasurer 4-29-05 214 863 1000 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					