

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000003876

Entity Name: SVD REALTY ASSET CORP.

FILED
Jan 11, 2007
Secretary of State

Current Principal Place of Business:

6400 IMPERIAL DR
P O BOX 8216
WACO, TX 76714 US

New Principal Place of Business:

6400 IMPERIAL DR
WACO, TX 76714 US

Current Mailing Address:

6400 IMPERIAL DRIVE
P O BOX 8216
WACO, TX 76714 US

New Mailing Address:

P O BOX 8216
WACO, TX 76714 US

FEI Number: 74-2836873

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PCX () Delete
Name: SARTAIN, JAMES T
Address: 6400 IMPERIAL DR
City-St-Zip: WACO, TX 767148216

Title: SVP () Delete
Name: DEWITT, TERRY
Address: 6400 IMPERIAL DRIVE
City-St-Zip: WACO, TX 767128216

Title: S () Delete
Name: BOSTICK, LOTTE
Address: 6400 IMPERIAL DR
City-St-Zip: WACO, TX 767148216

Title: TSVP () Delete
Name: HOLMES, JAMES C
Address: 6400 IMPERIAL DRIVE
City-St-Zip: WACO, TX 767128216

Title: SVP () Delete
Name: VANDER WOUDE, RICHARD J
Address: 6400 IMPERIAL DR
City-St-Zip: WACO, TX 767148216

Title: SVP () Delete
Name: GREAK, JOE S
Address: 6400 IMPERIAL DR
City-St-Zip: WACO, TX 767148216

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPC (X) Change () Addition
Name: SARTAIN, JAMES T
Address: 6400 IMPERIAL DR
City-St-Zip: WACO, TX 767148216

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JOE S GREAK

SVP

01/11/2007

Electronic Signature of Signing Officer or Director

Date