


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 26, 2005 08:00 AM
Secretary of State

DOCUMENT # F98000000668 1. Entity Name LINCOLN CONTRACTORS, INC.	
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Principal Place of Business P.O. BOX 1920 DALLAS, TX 75221	Mailing Address P.O. BOX 1920 DALLAS, TX 75221
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DO NOT WRITE IN THIS SPACE



04182005 No Chg-P CR2E034 (10/03)

4. FEI Number 75-1761673	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

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

**DO NOT WRITE
IN THIS SPACE**

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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)

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
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PCD POGUE, MACK 1505 FEDERAL STREET DALLAS, TX
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VST DAVIS, NANCY A 1505 FEDERAL STREET DALLAS, TX
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V BYRNE, TIMOTHY 1505 FEDERAL STREET DALLAS, TX
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V BYRNE, BRIAN 2603 WEST 22ND STREET, STE 22 OAKBROOK TERRACE, IL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V GRANT JR, BILLY 1505 FEDERAL STREET DALLAS, TX
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VAS JACKS, DAN 1505 FEDERAL STREET DALLAS, TX

U00000332453
04/26/05-80058-024 150.00

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IN THIS SPACE**

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:  **Dennis Streit**
Vice President
Assistant Secretary

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: 4-19-05 Daytime Phone #: 214-740-4440