2004 FOR PROFIT CORPORATION

FILED May 04, 2004 8:00 am Secretary of State

| ANNUAL REPURI | | | | | | Secretary of State | | | | |
|---|--|---|-------------------|---|--|---|--------------|-------------------------|----------------------------|-------------------|
| DOCUI 1. Entity Nam CENTEX | | | | | 05-04-200 |)4 90119 O | 47 ***: | | | |
| Principal Place of Business 2728 N. HARWOOD ST. DALLAS, TX 75201-1516 US | | Mailing Address P O BOX 199000 TAX DEPT. DALLAS, TX 75219-9000 US | | | | | | | | |
| 2. Principal Place of Business | | 3. Mailing Address | | | i | | | | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | | 04202004 C | hg-P | CR2E034 (| 10/03) | |
| City & State | | City & State | | | | | | olied For Applicable | | |
| Zip | Country | Zip Cou | | intry | | .5. Certificate of Stat | us Desired | | 75 Addi Required | |
| 6. Name and Address of Current Registered Agent | | | | | | 7. Name and Addre | ss of New Re | gistered Ager | ıt | |
| 1201 HAY | ATION SERVICE COMPANY S STREET SSEE, FL 32301-2525 | | Name Street Ad | 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 | Signature, typed or printed name of registered agent a | e required | when reinstating) | | DATE | | | | | |
| FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Finar Trust Fund Contribution. | | | | | \$5. Add | 00 May Be ed to Fees | | | | |
| 10. | OFFICERS AND | DIRECTORS | 11. | | | ADDITIONS/CHAN | GES TO OFFI | CERS AND DIF | ECTORS | IN 11 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | AVF MASON, JEFF A 2728 N. HARWOOD ST. DALLAS, TX 752011516 | SON, JEFF A 8 N. HARWOOD ST. | | E Et address - St-Zip | 272 | VP HOWIAK, DREW F. 8 N. HARWOOD ST. LAS, TX 75201 | | | Change | Addition Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | EED, JOEL S 128 N. HARWOOD ST. | | | I | AVP STEVENS, LYLE E. 2728 N. HARWOOD ST. DALLAS, TX 75201 | | | D | Change | Addition 💢 |
| TITLE NAME "STREET ADDRESS" CITY-ST-ZIP | V LOVELADY, KYLE D 2728 N. HARWOOD ST. DALLAS, TX 752011516 | 28 N. HARWOOD ST. | | I | 272 | RGE, RAYMOND G. 8 NORTH HARWOOD ST. LAS, TX 75201 | | | Change | X Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | /INZELER, DENNIS K 728 N. HARWOOD ST. | | | | | | | | Change | Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D WEINBERG, STEPHEN M 2728 N. HARWOOD STREET DALLAS, TX 752011516 | o □ Delete | 1 | | | | | | Change | Addition |
| TITLE NAME STREET ADDRESS CITY ST-7IP | SVP NEWMAN, TODD D 2728 N. HARWOOD STREET DALLAS TX 752011516 | ☐ Delete | | | 272 | VP MAN, TODD D. 8 N. HARWOOD S LAS, TX 75201 | ot. | ĽŽ | Change | ☐ Addition |

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

July E Sala

4/20/0 4

214-981-5000

Daytime Phone #