


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 18, 2005 8:00 am**  
**Secretary of State**

01-18-2005 90026 001 \*\*\*158.75

<b>DOCUMENT # F99000001046</b> 1. Entity Name <b>OWC ACQUISITION CORPORATION</b>					
Principal Place of Business <b>3801 PARKWOOD BLVD STE 100 FRISCO, TX 75034</b>			Mailing Address <b>P.O. BOX 2529 FRISCO, TX 75034</b>		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number <b>75-2799040</b>	
5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent <b>C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324</b>				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		DATE	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SHAW, WILLIAM J 4623 PINEVALLEY DR. FRISCO, TX 75034	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MALONE, JOHN 6705 GREYHAWK CR. PLANO, TX 75024	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD JACCARD, WALTER B 106 TENTH STREET SOUTH KIRKLAND, WA 98033	<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	VASD HENDRYCY, KENNETH E 3400 WELBORN STREET, #424 DALLAS, TX 75219	<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	VT MCCRUM, DAVID A 4565 VISTA KNOLL DRIVE PLANO, TX 75093	<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	V REED, BRYAN 2558 APRIL SOUND LANE FRISCO, TX 75034	<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	V GELINAS, R G 4907 CAPE CORAL DR. DALLAS, TX 75287	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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: <u>WPR</u> <u>Vice President</u> <u>1-5-05</u> <u>214-618-7207</u> <small>SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					

ATTACHMENT  
**Thousand Trails**® LP  
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40001267

CERTIFIED MAIL  
Return Receipt Requested  
Article #7002 0860 0002 2105 6863

January 05, 2005

State of Florida  
Division of Corporations  
P.O. Box 6198  
Tallahassee, FL 32314

Re: OWC Acquisition Corporation  
▪ 2005 for Profit Corporation Annual Report  
▪ Document #F99000001046

To Whom It May Concern:

Please find enclosed our 2005 for Profit Corporation Annual Report form for the above referenced corporation. Also enclosed is our check in the amount of \$158.75 for filing fees.

If you should have any questions please do not hesitate to contact me. My numbers are (800) 328-6226, ext. 7217, direct number (214) 618-7217, or facsimile number of (214) 618-7230.

Thank you for your help regarding the above.

Sincerely,



Patti Tschirhart  
Legal Administrative Assistant

Enclosures

/ppt