


92695

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED

Apr 28, 2006 08:00 AM
Secretary of State

DOCUMENT # F99000001261 1. Entity Name LINCOLN PROPERTY COMPANY NO. 2695, INC.	
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Principal Place of Business PO BOX 1920 DALLAS TX 75221	Mailing Address PO BOX 1920 DALLAS TX 75221
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

1st MOORE CR2E034 (10/05)

4. FEI Number 75-2786980	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324

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, 2006 Fee Will Be \$550.00 Make Check Payable to Florida Department of State	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	PD <input type="checkbox"/> Delete
NAME	DUVALL, WILLIAM C
STREET ADDRESS	1505 FEDERAL
CITY-ST-ZIP	DALLAS TX
TITLE	ST <input type="checkbox"/> Delete
NAME	DAVIS, NANCY A
STREET ADDRESS	1505 FEDERAL
CITY-ST-ZIP	DALLAS TX
TITLE	CD <input type="checkbox"/> Delete
NAME	POGUE, MACK
STREET ADDRESS	1505 FEDERAL
CITY-ST-ZIP	DALLAS TX
TITLE	V <input type="checkbox"/> Delete
NAME	COURTWRIGHT, GREGORY S
STREET ADDRESS	1505 FEDERAL
CITY-ST-ZIP	DALLAS TX
TITLE	AS <input type="checkbox"/> Delete
NAME	EVERETT, LEIGH A
STREET ADDRESS	1505 FEDERAL
CITY-ST-ZIP	DALLAS TX
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: *Leigh Ann Everett* **Leigh Ann Everett**
 Assistant Secretary **4-24-06** **214-740-4440**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #