


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 31, 2008 8:00 am
Secretary of State

03-31-2008 90037 044 ***150.00

DOCUMENT # G41543				
1. Entity Name PRE 1986 OPERATOR OF TREASURE ISLAND TENNIS & YACHT CLUB, INC.				
Principal Place of Business 3030 LBJ FREEWAY DALLAS, TX 75234 US		Mailing Address 3030 LBJ FREEWAY % TAX DEPT DALLAS, TX 75234 US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		
City & State		City & State		
Zip	Country	Zip	Country	
6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525				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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>				
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE	S	<input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HUGUELY, DAVID		NAME	<i>S RAND HUGUELY</i>
STREET ADDRESS	3030 LBJ FREEWAY, SUITE 700		STREET ADDRESS	<i>3030 LBJ FRWY.</i>
CITY-ST-ZIP	DALLAS, TX 75234		CITY-ST-ZIP	<i>DALLAS, TX. 75234</i>
TITLE	VP	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HOWE, DOUG		NAME	
STREET ADDRESS	3030 LBJ FREEWAY		STREET ADDRESS	
CITY-ST-ZIP	DALLAS, TX 75234		CITY-ST-ZIP	
TITLE	PD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	AFFELDT, ERIC		NAME	<i>AFFELDT, ERIC</i>
STREET ADDRESS	3030 LBJ FREEWAY		STREET ADDRESS	
CITY-ST-ZIP	DALLAS, TX 75234		CITY-ST-ZIP	
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME			NAME	<i>T ANGELA STEPHENS</i>
STREET ADDRESS			STREET ADDRESS	<i>3030 LBJ FRWY.</i>
CITY-ST-ZIP			CITY-ST-ZIP	<i>DALLAS, TX. 75234</i>
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME	
STREET ADDRESS			STREET ADDRESS	
CITY-ST-ZIP			CITY-ST-ZIP	
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME	
STREET ADDRESS			STREET ADDRESS	
CITY-ST-ZIP			CITY-ST-ZIP	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <i>Angela Stephens</i>		ANGELA STEPHENS		2-12-08 972-243-6191
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date</small>		<small>Daytime Phone #</small>