2003 LIMITED LIABILITY COMPANY/ UNIFORM BUSINESS REPORT (UBR)

FILED Mar 24, 2003 8:00 am Secretary of State 03-24-2003 90688 029 ****50.00

r Cubib Home	MENT #M98000000 PROPERTIES SPE 1, L.L.C			03 21	2003 30000		0.00
Principal Place of Business 6500 INTERNATIONAL PARKWAY PLANO, TX 75093		Mailing Address TAX DEPT. P.O. BOX 261830 PLANO, TX 75026-1830		30045872			
2. Principal Place of Business		3. Mailing Address					<u>(</u>
Suite, Apt. #, etc.		Suite, Apt. #. etc.			ERE IF MAKING		lled For
City & State		City & State		4. FEI Number			Applicable
Zip	Country	Zip	Country	5. Certificate of Status Desir	rea L F	ee Required	- I
	6. Name and Address of Curren	t Registered Agent		7. Name and Address of New Registered Agent			
1201 HAYS \$	ION SERVICE COMPANY STREET SEE, FL 32301-2525		Street Address		itable)		
			City		FL	Zip Code	
the obligation	named entity submits this statement ons of registered agent. Signalum, typed or printed name of registered age	<u>. </u>	5 registered office or regis TE: Registered Agents synature requ		DATE		
		Make Check Paval	(DWITE FEETS \$50.09 bie to Florida Departri e By May 1, 2003	ient of State»	IONS/CHANGES	· ·	
9.		Delete	TITLE			Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP	MGR CALDWELL, EUGENE 6500 INTERNATIONAL PARKY PLANO, TX 75093		NAME Street address City-St-Zip		_		Addition
TITLE NAME STREET ADDRESS CBY-ST-ZIP	MGR WATSON, TODD M 6500 INTERNATIONAL PARKY PLANO, TX 75093	□ Detete	TITLE NAME STREET ADDRESS CITY-S1-ZIP			Change	
TITLE NAME STREET ADDRESS	MGRM S&A PROPERTIES CORP 6500 INTERNATIONAL PARKY PLANO, TX 75093	Delene	TITLE NAME STREET ADDRESS CITY-ST-23P	. ; -		☐ Change	Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS	S WYNNE, DIANA S 6500 INTERNATIONAL PARK' PLANO, TX 75093	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			□ Change	Addition
TITLE HAME STREET ADDRESS		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			□ Change	Addition
TITLE NAME STREET ADDRESS	1	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition
11. I hereby Indicate	certify that the Information supplied d on this report is true and accurate lability company or the receiver or true	with this filing does not qualify and that my signature shall ha stee empowered to execute the	for the exemption stated i	in Section 119.07(3)(i), Florida St s If made under oath; that I am a chapter 608, Florida Statutes.	atutes. I further or managing memi	ertify that the liber or manage	nformation er of the

Diana S. Wynne

SIGNATURE:
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER MANAGER OR AUTHORIZED REPRESENTATIVE

Asst. Secretary

03/06/03

972.588.5000

Daytime Phone #