


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jun 04, 2007 8:00 am
Secretary of State

06-04-2007 90452 022 ****50.00

DOCUMENT # M98000001518			
1. Entity Name CBM ONE LLC			
Principal Place of Business 8115 PRESTON ROAD 400 DALLAS, TX 75225		Mailing Address 8115 PRESTON ROAD 400 DALLAS, TX 75225	
2. Principal Place of Business - No P.O. Box # <i>3141 Hood St.</i>		3. Mailing Address <i>3141 Hood St.</i>	
Suite, Apt. #, etc. <i>Suite 700</i>		Suite, Apt. #, etc. <i>Suite 700</i>	
City & State <i>Dallas TX</i>		City & State <i>Dallas TX</i>	
Zip <i>75219</i>	Country <i>USA</i>	Zip <i>75219</i>	Country <i>USA</i>
6. Name and Address of Current Registered Agent THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS STREET TALLAHASSEE, FL 32301		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 _____			
Filing Fee is \$50.00 Due by September 14, 2007		Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIR GALPERN, C. AL 8115 PRESTON ROAD, SUITE 400 DALLAS, TX 75225 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>See Attachment for Managers & Officers.</i> <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIR LATHAM, CHARLES R 8115 PRESTON ROAD, SUITE 400 DALLAS, TX 75225 <input checked="" 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	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.			
SIGNATURE: <i>John M. Norris</i>		JOHN M. NORRIS, V.P. 5-10-07 214-715-7611	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE		Date Daytime Phone #	

40119723



05102007 Chg-LLC CR2E083 (12/06)

4. FEI Number
NOT APPLICABLE

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

ATTACHMENT

40119723

DOCUMENT #M98000001518
CBM ONE LLC

ATTACHMENT
to
STATE OF FLORIDA
2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT

CBM ONE LLC

MANAGERS &/or OFFICERS

<u>Name</u>	<u>Title</u>	<u>Address</u>
Stephen J. Furnary	Manager President	3141 Hood Street, Suite 700 Dallas, TX 75219
C. Stephen Cordes	Manager Vice President	3141 Hood Street, Suite 700 Dallas, TX 75219
Charles R. Lathem	Manager Vice President Secretary	3141 Hood Street, Suite 700 Dallas, TX 75219
John M. Norris	Vice President Assistant Secretary Assistant Treasurer	3141 Hood Street, Suite 700 Dallas, TX 75219
Vickie Dell	Treasurer Assistant Secretary	3141 Hood Street, Suite 700 Dallas, TX 75219