

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

V3625

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DOCUMENT # P29748

(1)

1. Corporation Name

LINCOLN E.C.W. PARTNERS, INC.



Principal Place of Business

**1505 FEDERAL STREET
P. O. BOX 1920
DALLAS TX 75221-8920**

Mailing Address

**1505 FEDERAL STREET
P. O. BOX 1920
DALLAS TX 75221-8920**

3. Date Incorporated or Qualified
06/14/1990

3a. Date of Last Report
04/26/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

4. FEI Number

75-2333288

Applied For

Not Applicable

5. Certificate of Status Desired

☐ **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution

☐ **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and their approval

Signature typed or printed name of registered agent and their approval

DATE

12. OFFICERS AND DIRECTORS

TITLE	C	<input type="checkbox"/> DELETE
NAME	POGUE, MACK	
STREET ADDRESS	1505 FEDERAL STREET	
CITY-STATE-ZIP	DALLAS TX	
TITLE	PD	<input type="checkbox"/> DELETE
NAME	BYRNE, TIMOTHY	
STREET ADDRESS	1505 FEDERAL STREET	
CITY-STATE-ZIP	DALLAS TX	
TITLE	V	<input type="checkbox"/> DELETE
NAME	JACKS, DAN	
STREET ADDRESS	1505 FEDERAL STREET	
CITY-STATE-ZIP	DALLAS TX	
TITLE	VST	<input checked="" type="checkbox"/> DELETE
NAME	WALLIS, MARK W.	
STREET ADDRESS	1505 FEDERAL STREET	
CITY-STATE-ZIP	DALLAS TX	
TITLE	V	<input type="checkbox"/> DELETE
NAME	GRANT, BILLY J.	
STREET ADDRESS	1505 FEDERAL STREET	
CITY-STATE-ZIP	DALLAS TX	
TITLE	V	<input checked="" type="checkbox"/> DELETE
NAME	DEBAPTISTE, MARC	
STREET ADDRESS	1505 FEDERAL STREET	
CITY-STATE-ZIP	DALLAS TX	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-STATE-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-STATE-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-STATE-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	VST
4.3 STREET ADDRESS	Nancy A. Davis
4.4 CITY-STATE-ZIP	1505 Federal Street Dallas, Texas 75201
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-STATE-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-STATE-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 unchanged, or on an attachment with an address.

SIGNATURE: *Leigh Ann Everett* Leigh Ann Everett, Asst Sec 4-2-96 214-740-4440

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)

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LINCOLN E.C.W. PARTNERS, INC.
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ADDITIONAL OFFICERS:

ASSISTANT SECRETARY
Leigh Ann Everett
1505 Federal Street
Dallas, Texas 75201