

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 15, 2008 8:00 am
Secretary of State

05-15-2008 90027 047 ***150.00

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04232008 No Chg-P CR2E034 (11/05)

| | |
|------------------------------------|-------------------------------|
| 4. FEI Number 65-0499004 | Applied For Not Applicable |
|------------------------------------|-------------------------------|

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

POWELL, SUSAN F
8380 BAYMEADOWS ROAD
SUITE 12
JACKSONVILLE, FL 32256

**DO NOT WRITE
IN THIS SPACE**

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, 2008 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

| | |
|----------------|--|
| TITLE | EVD |
| NAME | POWELL, SUSAN F |
| STREET ADDRESS | 8380 BAYMEADOWS ROAD, SUITE 12 |
| CITY-ST-ZIP | JACKSONVILLE, FL 32256 |
| TITLE | SVPT <i>ROGER LAXTON</i> |
| NAME | <i>BRILL, JOHN M</i> |
| STREET ADDRESS | <i>15305 DALLAS PKWY. #700 SUITE 200</i> |
| CITY-ST-ZIP | <i>ADDISON, TX 76001 PLANO, TX 75093</i> |
| TITLE | CEOD |
| NAME | CORCOS, YVES |
| STREET ADDRESS | <i>15305 DALLAS PKWY. #700 SUITE 200</i> |
| CITY-ST-ZIP | <i>ADDISON, TX 76001 PLANO, TX 75093</i> |
| TITLE | ACS |
| NAME | TELLES, LUCY |
| STREET ADDRESS | <i>46306 DALLAS PARKWAY #370 SUITE 200</i> |
| CITY-ST-ZIP | <i>ADDISON, TX 75001 PLANO, TX 75093</i> |
| TITLE | CSGC |
| NAME | VERNE, MAXINE |
| STREET ADDRESS | 199 WATER ST |
| CITY-ST-ZIP | NEW YORK, NY 10038 |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |

**DO NOT WRITE
IN THIS SPACE**

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: *Susan F. Powell* **SUSAN POWELL** 04-24-08 (904) 260-6990