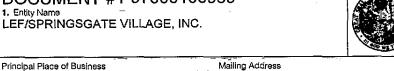
## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # P97000100969 1. Entity Name LEF/SPRINGSGATE VILLAGE, INC.

**FILED** May 02, 2005 08:00 AM Secretary of State



ONE GREENWAY PLAZA SUITE 850 HOUSTON, TX 77046

ONE GREENWAY PLAZA SUITE 850 HOUSTON, TX 77046-0102



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6. Name and Address of Current Registered Agent

No Chg-P CR2E034 (10/03) 04282005

4. FEI Number 65-0798290 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

DO NOT WRITE SHAPIRO, ROBERT L 2627 IVES DAIRY ROAD IN THIS SPACE SUITE 118 AVENTURA, FL 33180

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									
	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.00	Election Campaign Finar Trust Fund Contribution.		\$5.00 May Be Added to Fees					
10.	OFFICERS AND DIREC	TORS			Abundance (Alabanta Pris)				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP FRIEDMAN, LEONARD E ONE GREENWAY PLAZA., STE 850 HOUSTON, TX 770460196				U00000357902 05/04/05-80092-021 158.75				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS RAY, SANDRA E ONE GREENWAY PLAZA, SUITE 850 HOUSTON, TX 770460196	)							
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V SWINKE, DAVID L. ONE GREENWAY PLAZA, SUITE 850 HOUSTON, TX 770460196	)		DO	NOT WRITE				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT THIBAUT, HOWARD W ONE GREENWAY PLAZA, STE 850 HOUSTON, TX 770460196			IN '	THIS SPACE				
TITLE NAME STREET ADDRESS CITY-ST-ZIP					1. (2020) 100 °C				
TITLE NAME STREET ADDRESS CITY-ST-ZIP									
12 Lharahu	cortify that the information symplied with this f	iling does not qualify for the exe	emplion stated	in Section 119.07(3)	ifi). Florida Statutes, I further certify that the information				

Thereby certify that the information supplied with this filling does not quality for the extending stated in Section 118.70(3)(i), ritorial statutes. Truther early 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 cath; 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: ≤

Vice President

713355410h