

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000006055

FILED
Jan 11, 2007
Secretary of State

Entity Name: BOSQUE LEASING GP CORP

Current Principal Place of Business:

6400 IMPERIAL DRIVE
WACO, TX 76712

New Principal Place of Business:

Current Mailing Address:

PO BOX 8216
WACO, TX 767148216

New Mailing Address:

FEI Number: 74-2836877 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ELK, SCOTT
SANCTUARY CENTRE-SUITE 200E
4800 NORTH FEDERAL HIGHWAY
BOCA RATON, FL 33431 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CP () Delete
Name: SARTAIN, JAMES T
Address: 6400 IMPERIAL DRIVE
City-St-Zip: WACO, TX 76712

Title: VPTD () Delete
Name: HOLMES, JAMES C
Address: 6400 IMPERIAL DRIVE
City-St-Zip: WACO, TX 76712

Title: D () Delete
Name: BAKER, J BRYAN
Address: 6400 IMPERIAL DRIVE
City-St-Zip: WACO, TX 76712

Title: S () Delete
Name: BOSTICK, LOTTE
Address: 6400 IMPERIAL DRIVE
City-St-Zip: WACO, TX 76712

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VPD (X) Change () Addition
Name: BAKER, J BRYAN
Address: 6400 IMPERIAL DRIVE
City-St-Zip: WACO, TX 76712

Title: VPS (X) Change () Addition
Name: BOSTICK, LOTTE
Address: 6400 IMPERIAL DRIVE
City-St-Zip: WACO, TX 76712

Title: SVP () Change (X) Addition
Name: GREAK, JOE S
Address: 6400 IMPERIAL DRIVE
City-St-Zip: WACO, TX 76712

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOE S GREAK

SVP

01/11/2007

Electronic Signature of Signing Officer or Director

_____ Date