

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000006055

FILED  
Mar 06, 2008  
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: VPD ( ) Delete  
Name: BAKER, J BRYAN  
Address: 6400 IMPERIAL DRIVE  
City-St-Zip: WACO, TX 76712

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

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

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify 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

03/06/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date