


**2008 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 14, 2008 08:00 AM**  
**Secretary of State**

DOCUMENT # F07000001524	
1. Entity Name ACCOLADE PROPERTY MANAGEMENT, INC.	

Principal Place of Business 621 COWBOYS PARKWAY, STE. 200 IRVING, TX 75063	Mailing Address 621 COWBOYS PARKWAY, STE. 200 IRVING, TX 75063
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**DO NOT WRITE IN THIS SPACE**



01102008 No Chg-P CR2E034 (11/05)

4. FEI Number 04-3694643	Applied For Not Applicable
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5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

SUTTON, KEVIN H.  
 101 E. KENNEDY BLVD., STE. 3700  
 TAMPA, FL 33602

**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 NAME STREET ADDRESS CITY-ST-ZIP	D BAKER, STEPHANIE 1910 LONG BRANCH CT. ARLINGTON, TX 76012
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BATES ALLEN, SUSAN 621 COWBOYS PARKWAY, STE. 200 IRVING, TX 75063
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UD0000783409  
 01/16/08-80013-017 150.00

**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: Stephanie Baker **STEPHANIE BAKER** 1/10/2008 (214) 496-0600  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DIRECTOR Date Daytime Phone # X228