



05-102
(Rev. 1-08/28)
Tcode 13196

TEXAS FRANCHISE TAX PUBLIC INFORMATION REPORT

(To be filed by Corporations and Limited Liability Companies (LLCS))
This report **MUST** be filed to satisfy franchise tax requirements

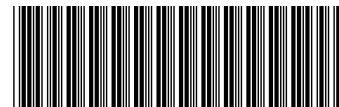
Taxpayer number Report year
75-1837529 **2008**

You have certain rights under Chapter 552 and 559, Government Code, to review, request, and correct information we have on file about you. Contact us at: (512) 463-4600, or (800) 252-1381, toll free nationwide.

Taxpayer name **Beverly Oaks Homeowners Association**
 Mailing address **2927 Winterberry Drive**
 City **Carrollton** State **Tx** ZIP Code **75007** Plus 4
 Secretary of State file number or Comptroller file number **60888401**

Blacken circle if there are currently no changes or additions to the information displayed in Section A of this report. Then complete Sections B and C.

Entity's principal office **2927 Winterberry Drive, Carrollton, Texas 75007**
 Principal place of business **Wilshire Drive, Irving Texas 75061**



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Please sign below!

Officer, director and member information is reported as of the date a Public Information Report is completed. The information is updated annually as part of the franchise tax report. There is no requirement or procedure for supplementing the information as officers, directors, or members change throughout the year.

SECTION A Name, title and mailing address of each officer, director or member.

Name Robert Bauer	Title President	Director <input type="radio"/> YES	mmdyy Term expiration 13111
Mailing address 580 Decker Dr, Ste 250	City Irving	State Tx	ZIP code 75062
Name Brenda Madison	Title Secretary	Director <input type="radio"/> YES	mmdyy Term expiration 13111
Mailing address 120 Wilshire Court	City Irving	State Tx	ZIP code 75061
Name Kristen Mallory	Title Treasurer	Director <input type="radio"/> YES	mmdyy Term expiration 13111
Mailing address 1514 Brentwood Drive	City Irving	State Tx	ZIP code 75061
Name	Title	Director <input type="radio"/> YES	mmdyy Term expiration
Mailing address	City	State	ZIP code

SECTION B Enter the information required for each corporation or LLC, if any, in which this reporting entity owns an interest of ten percent (10%) or more.

Name of owned (subsidiary) corporation or limited liability company	State of formation	Texas SOS file number, if any	Percentage of Ownership
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SECTION C Enter the information required for each corporation or LLC, if any, that owns an interest of ten percent (10%) or more in this reporting entity or limited liability company.

Name of owned (parent) corporation or limited liability company	State of formation	Texas SOS file number, if any	Percentage of Ownership
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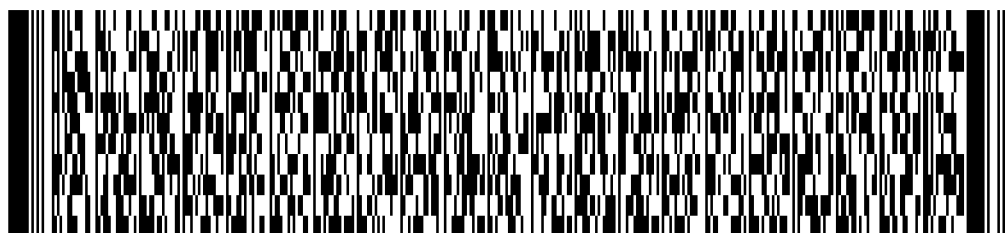
Registered agent and registered office currently on file. (See instructions if you need to make changes)
Agent: John Corona Blacken circle if you need forms to change the registered agent or registered office information.
Office: 12700 Park Central Drive, Suite 600, City **Dallas** State **Tx** ZIP Code **75251**

The above information is required by Section 171.203 of the Tax Code for each corporation or limited liability company that files a Texas Franchise Tax Report. Use additional sheets for Sections A, B, and C, if necessary. The information will be available for public inspection.

I declare that the information in this document and any attachments is true and correct to the best of my knowledge and belief, as of the date below, and that a copy of this report has been mailed to each person named in this report who is an officer, director or member and who is not currently employed by this, or a related, corporation or limited liability company.

sign here Title **Secretary** Date **6-18-09** Area code and phone number **(214) 537-0392**

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