

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

Page 1 of 2

DOCUMENT # 810236 (0)

1. Corporation Name
THE EARLY COMPANY



Principal Place of Business: 801 N ELDRIDGE ST, PO BOX 218218, HOUSTON TX 77218
Mailing Address: C/O TAX DEPT., P.O. BOX 60035, NEW ORLEANS LA 70160

3. Date Incorporated or Qualified: 03/04/1955
3a. Date of Last Report: 04/20/1995
4. FEI Number: 72-0457007
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

2. Principal Place of Business (21) Suite, Apt. #, etc. (22) City & State (23) Zip (24) Country (25)
2a. Mailing Address (26) Suite, Apt. #, etc. (27) City & State (28) Zip (29) Country (30)

9. Name and Address of Current Registered Agent: CT CORPORATION SYSTEM, 1200 S. PINE ISLAND ROAD, PLANTATION FL 33324
10. Name and Address of New Registered Agent (81) Name (82) Street Address (83) City (84) City (85) Zip Code: FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: [Signature] (NOTE: Registered Agent signature required when reinstating) SEE ATTACHED LISTING

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: PD	HOWSON, R.E. <input type="checkbox"/> DELETE	1.1 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME: PD	HOWSON, R.E.	1.2 NAME: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS: 1450 POYDRAS ST.	1450 POYDRAS ST.	1.3 STREET ADDRESS: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
CITY-ST-ZIP: NEW ORLEANS LA 70112	NEW ORLEANS LA 70112	1.4 CITY-ST-ZIP: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE: VD	HATTOX, B.A. <input type="checkbox"/> DELETE	2.1 TITLE: <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME: VD	HATTOX, B.A.	2.2 NAME: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS: 1450 POYDRAS ST.	1450 POYDRAS ST.	2.3 STREET ADDRESS: 801 N. Eldridge Street	
CITY-ST-ZIP: NEW ORLEANS LA 70112	NEW ORLEANS LA 70112	2.4 CITY-ST-ZIP: Houston IX 77079	
TITLE: V	HENZLER, T.A. <input type="checkbox"/> DELETE	3.1 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME: V	HENZLER, T.A.	3.2 NAME: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS: 1450 POYDRAS ST.	1450 POYDRAS ST.	3.3 STREET ADDRESS: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
CITY-ST-ZIP: NEW ORLEANS LA 70112	NEW ORLEANS LA 70112	3.4 CITY-ST-ZIP: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE: T	JOLLIFF, R.A. <input type="checkbox"/> DELETE	4.1 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME: T	JOLLIFF, R.A.	4.2 NAME: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS: 1450 POYDRAS ST.	1450 POYDRAS ST.	4.3 STREET ADDRESS: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
CITY-ST-ZIP: NEW ORLEANS LA 70112	NEW ORLEANS LA 70112	4.4 CITY-ST-ZIP: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE: VD	PURTELL, L.R. <input checked="" type="checkbox"/> DELETE	5.1 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME: VD	PURTELL, L.R.	5.2 NAME: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS: 1450 POYDRAS ST.	1450 POYDRAS ST.	5.3 STREET ADDRESS: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
CITY-ST-ZIP: NEW ORLEANS LA	NEW ORLEANS LA	5.4 CITY-ST-ZIP: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE: D	HIGGINS, III W.L. <input checked="" type="checkbox"/> DELETE	6.1 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME: D	HIGGINS, III W.L.	6.2 NAME: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS: 1450 POYDRAS ST.	1450 POYDRAS ST.	6.3 STREET ADDRESS: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
CITY-ST-ZIP: NEW ORLEANS LA 70112	NEW ORLEANS LA 70112	6.4 CITY-ST-ZIP: <input type="checkbox"/> Change <input type="checkbox"/> Addition	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [Signature] T.A. Henzler 4/12/96 (504) 587-4111
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR V.P. - Tax Admin. Date Daytime Phone #

CR2E034 (12/95)

**THE EARLY COMPANY
OFFICERS AND DIRECTORS**

OFFICERS

President and Chief
Executive Officer

R.E. Howson

BUSINESS ADDRESS

1450 Poydras Street
New Orleans, LA 70112

Executive Vice President and
Chief Financial Officer

B.A. Hattox

801 N. Eldridge Street
Houston, TX 77079

Vice President-Tax
Administration

T.A. Henzler

1450 Poydras Street
New Orleans, LA 70112

Treasurer

R.A. Jolliff

1450 Poydras Street
New Orleans, LA 70112

Secretary

J.S. Tsai

1450 Poydras Street
New Orleans, LA 70112

Assistant Secretary

R.E. Stumpf

1450 Poydras Street
New Orleans, LA 70112

DIRECTORS

R.E. Howson

1450 Poydras Street
New Orleans, LA 70112

B.A. Hattox

801 N. Eldridge Street
Houston, TX 77079

As of 01/18/96
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