

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

DOCUMENT # M03000000277

1. Entity Name
TRIBBLE & STEPHENS CO. GP, L.L.C.



Principal Place of Business
8588 KATY FREEWAY SUITE 100
HOUSTON, TX 77024

Mailing Address
8588 KATY FREEWAY SUITE 100
HOUSTON, TX 77024

FILED
Jan 23, 2006 08:00 AM
Secretary of State



01112006No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
72-1542297

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

**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 _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**Filing Fee is \$50.00
Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGR
TRIBBLE, JAMES L
8580 KATY FREEWAY, STE. 320
HOUSTON, TX 77024

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGR
STEPHENS, JAMES H
8580 KATY FREEWAY, STE. 320
HOUSTON, TX 77024

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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STREET ADDRESS
CITY-ST-ZIP

1100000394417
11/26/06-80009-022 50.00

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IN THIS SPACE**

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: _____

James H. Stephens, Manager

1-16-06

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #