


**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 31, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # 818340</b> 1. Entity Name <b>KING RANCH, INC.</b>																																																		
Principal Place of Business <b>HWY 141 WEST-LAURO'S HILL PO BOX 1090 KINGSVILLE, TX 78364-1090 US</b>		Mailing Address <b>HWY 141 WEST-LAURO'S HILL PO BOX 1090 KINGSVILLE, TX 78364-1090 US</b>																																																
<b>DO NOT WRITE IN THIS SPACE</b>		 01242005 No Chg-P CR2E034 (10/03)																																																
6. Name and Address of Current Registered Agent  <b>UNDERBRINK, ROBERT J. 8050 SOUTH U.S. HWY 27 SOUTH BAY, FL 33493</b>		4. FEI Number <b>74-0726547</b> Applied For Not Applicable 5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b> Additional Fee Required																																																
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>		<b>DO NOT WRITE IN THIS SPACE</b>																																																
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees																																																
10. OFFICERS AND DIRECTORS <table border="1" style="width: 100%; border-collapse: collapse;"><tr><td style="width: 15%;">TITLE</td><td>CD</td></tr><tr><td>NAME</td><td>CLEMENT, JAMES H JR</td></tr><tr><td>STREET ADDRESS</td><td>THREE RIVERWAY SUITE 1600</td></tr><tr><td>CITY- ST- ZIP</td><td>HOUSTON, TX 77056</td></tr><tr><td>TITLE</td><td>DPCO</td></tr><tr><td>NAME</td><td>HUNT, JACK</td></tr><tr><td>STREET ADDRESS</td><td>THREE RIVERWAY SUITE 1600</td></tr><tr><td>CITY- ST- ZIP</td><td>HOUSTON, TX 77056</td></tr><tr><td>TITLE</td><td>VTCF</td></tr><tr><td>NAME</td><td>GARDINER, WILLIAM J</td></tr><tr><td>STREET ADDRESS</td><td>THREE RIVERWAY SUITE 1600</td></tr><tr><td>CITY- ST- ZIP</td><td>HOUSTON, TX 77056</td></tr><tr><td>TITLE</td><td>V</td></tr><tr><td>NAME</td><td>UNDERBRINK, ROBERT</td></tr><tr><td>STREET ADDRESS</td><td>THREE RIVERWAY SUITE 1600</td></tr><tr><td>CITY- ST- ZIP</td><td>HOUSTON, TX 77056</td></tr><tr><td>TITLE</td><td>V</td></tr><tr><td>NAME</td><td>GENHO, PAUL</td></tr><tr><td>STREET ADDRESS</td><td>THREE RIVERWAY SUITE 1600</td></tr><tr><td>CITY- ST- ZIP</td><td>HOUSTON, TX 77056</td></tr><tr><td>TITLE</td><td>VS</td></tr><tr><td>NAME</td><td>PERRONE, FRANK</td></tr><tr><td>STREET ADDRESS</td><td>THREE RIVERWAY SUITE 1600</td></tr><tr><td>CITY- ST- ZIP</td><td>HOUSTON, TX 77056</td></tr></table>		TITLE	CD	NAME	CLEMENT, JAMES H JR	STREET ADDRESS	THREE RIVERWAY SUITE 1600	CITY- ST- ZIP	HOUSTON, TX 77056	TITLE	DPCO	NAME	HUNT, JACK	STREET ADDRESS	THREE RIVERWAY SUITE 1600	CITY- ST- ZIP	HOUSTON, TX 77056	TITLE	VTCF	NAME	GARDINER, WILLIAM J	STREET ADDRESS	THREE RIVERWAY SUITE 1600	CITY- ST- ZIP	HOUSTON, TX 77056	TITLE	V	NAME	UNDERBRINK, ROBERT	STREET ADDRESS	THREE RIVERWAY SUITE 1600	CITY- ST- ZIP	HOUSTON, TX 77056	TITLE	V	NAME	GENHO, PAUL	STREET ADDRESS	THREE RIVERWAY SUITE 1600	CITY- ST- ZIP	HOUSTON, TX 77056	TITLE	VS	NAME	PERRONE, FRANK	STREET ADDRESS	THREE RIVERWAY SUITE 1600	CITY- ST- ZIP	HOUSTON, TX 77056	<b>DO NOT WRITE IN THIS SPACE</b>  000000205398 01/31/05-80042-024 150.00
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<b>12.</b> I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: <u>William J. Gardiner</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Date <b>01/24/2005</b> Daytime Phone # <b>(832) 681-5700</b>																																																