

2013 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M03000003249

Entity Name: ZACHRY PLANT MANAGEMENT, LLC**Current Principal Place of Business:**527 LOGWOOD
SAN ANTONIO, TX 78221**Current Mailing Address:**527 LOGWOOD
SAN ANTONIO, TX 78221 US**FEI Number:** 47-0911490**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US*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.***SIGNATURE:**_____
Electronic Signature of Registered Agent_____
Date**Authorized Person(s) Detail :**

Title	MGRM
Name	BURKE, GERLAD P
Address	527 LOGWOOD
City-State-Zip:	SAN ANTONIO TX 78221

Title	P
Name	ZACHRY, JOHN B
Address	527 LOGWOOD
City-State-Zip:	SAN ANTONIO TX 78221

Title	VP
Name	BRAUER, STEVEN K
Address	527 LOGWOOD
City-State-Zip:	SAN ANTONIO TX 78221

Title	T
Name	MCDONALD, D. KIRK
Address	527 LOGWOOD
City-State-Zip:	SAN ANTONIO TX 78221

Title	S
Name	GOFF, COLLEN M
Address	527 LOGWOOD
City-State-Zip:	SAN ANTONIO TX 78221

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: D. KIRK MCDONALD**TREASURER****04/24/2013**_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date