

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 12, 2004 8:00 am
Secretary of State

04-12-2004 90248 005 ***150.00

DOCUMENT # 833244

1. Entity Name
GILBERT/COMMONWEALTH, INC.



Principal Place of Business
2675 MORGANTOWN ROAD
READING, PA 19607 US

Mailing Address
5 GREENWAY PLAZA
TAY DEPT STE 5067
HOUSTON, TX 77046 US

54030646



04022004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
95-4537347
Applied For
Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD.
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

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	EVT
NAME	GALLAGHER, JOHN G
STREET ADDRESS	5 GREENWAY PLAZA
CITY-ST-ZIP	HOUSTON, TX 77046
TITLE	PD
NAME	HALL, WILLIAM E
STREET ADDRESS	5 GREENWAY PLAZA
CITY-ST-ZIP	HOUSTON, TX 77046
TITLE	AS
NAME	JOHANSON, THOMAS L
STREET ADDRESS	100 WEST WALNUT STREEY
CITY-ST-ZIP	PASADENA, CA 91124
TITLE	S
NAME	KALBAN, L S
STREET ADDRESS	5 GREENWAY PLAZA
CITY-ST-ZIP	HOUSTON, TX 77046
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

John G. Gallagher JOHN G. GALLAGHER 4-08-04 (713) 407-7618