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FILED

**Jan 23 1997 8:00am
Secretary of State**

**PROFIT CORPORATION
ANNUAL REPORT
1997**



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

DOCUMENT # 852081 (9)

**1. Corporation Name
EVT HOLDINGS, INC.**



Principal Place of Business
3900 ESSEX LANE
SUITE 1200
HOUSTON TX 77027

Mailing Address
3900 ESSEX LANE
SUITE 1200
HOUSTON TX 77027-5112

3. Date Incorporated or Qualified
03/04/1982

3a. Date of Last Report
03/29/1996

4. FEI Number
95-3694169

Applied For
 Applied For
 Not Applicable

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 City & State

24 Zip **25** Country

2a. Mailing Address

26 Suite, Apt. #, etc

27 City & State

28 City & State

29 Zip **30** Country

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 (P.O. Box Number is Not Acceptable)

83

84 City **85** Zip Code

FL 85

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 _____ **DATE** _____

Signature of principal officer and registered agent and filer, if applicable. (NOTE: Registered Agent signature required when reinstating.)

12. OFFICERS AND DIRECTORS

TITLE	PD	<input checked="" type="checkbox"/> DELETE
NAME	PROBERT, TIMOTHY	
STREET ADDRESS	3900 ESSEX LANE, #1200	
CITY-ST-ZIP	HOUSTON TX	
TITLE	VPAS	<input checked="" type="checkbox"/> DELETE
NAME	MYERS, FRANKLIN	
STREET ADDRESS	CHURAY, DANIEL J	
CITY-ST-ZIP	HOUSTON TX	
TITLE	VPAS	<input type="checkbox"/> DELETE
NAME	O'DONNELL, LARRY	
STREET ADDRESS	3900 ESSEX LANE, #1200	
CITY-ST-ZIP	HOUSTON TX	
TITLE	AS	<input type="checkbox"/> DELETE
NAME	MCKEEVER, DARLENE	
STREET ADDRESS	3900 ESSEX LANE, #1200	
CITY-ST-ZIP	HOUSTON TX	
TITLE	S	<input type="checkbox"/> DELETE
NAME	SMITH, LINDA J	
STREET ADDRESS	3900 ESSEX LANE, #1200	
CITY-ST-ZIP	HOUSTON TX	
TITLE	TD	<input checked="" type="checkbox"/> DELETE
NAME	MATTSON, ERIC L.	
STREET ADDRESS	3900 ESSEX LANE, #1200	
CITY-ST-ZIP	HOUSTON TX	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Dick, Matthew G.	
1.3 STREET ADDRESS	3900 Essex Lane, Suite 1200	
1.4 CITY-ST-ZIP	Houston, TX 77027	
2.1 TITLE	VPAS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	Churay, Daniel J.	
2.3 STREET ADDRESS	3900 Essex Lane Suite 1200	
2.4 CITY-ST-ZIP	Houston, TX 77027	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE	T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	Thielen, Vince	
6.3 STREET ADDRESS	3900 Essex Lane, Suite 1200	
6.4 CITY-ST-ZIP	Houston, TX 77027	

14. I do 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 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 amendment with an address.

SIGNATURE: *Dallen Mortham* **Assistant Sec. 1/9/96**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/96)