

1974113866  
**2000 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Feb 28, 2000 8:00 am**  
**Secretary of State**

02-28-2000 90181 003 \*\*\*150.00

00043400



DO NOT WRITE IN THIS SPACE

**DOCUMENT # 855516**

1. Entity Name

**BASS ENTERPRISES PRODUCTION CO.**

Principal Place of Business

Mailing Address

**2300 FIRST CITY BANK TOWER  
201 MAIN STREET  
FT WORTH TX 76102**

**2300 FIRST CITY BANK TOWER  
201 MAIN STREET  
FT WORTH TX 76102-3105**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**75-1076930**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

6. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION FL 33324**

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.

(See criteria on back) ☒

**FILE NOW!!! FEE IS \$150.00  
After MAY 1, 2000 Fee will be \$550.00  
Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

11.

OFFICERS AND DIRECTORS

12.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

TITLE	D	<input type="checkbox"/> Delete
NAME	BASS, SID R.	
STREET ADDRESS	201 MAIN ST	
CITY-ST-ZIP	FT WORTH TX	
TITLE	P	<input type="checkbox"/> Delete
NAME	MEDARY, WILLIAM H.	
STREET ADDRESS	201 MAIN ST	
CITY-ST-ZIP	FT WORTH TX	
TITLE	D	<input type="checkbox"/> Delete
NAME	BASS, LEE M.	
STREET ADDRESS	201 MAIN ST	
CITY-ST-ZIP	FT WORTH TX	
TITLE	D	<input type="checkbox"/> Delete
NAME	BASS, PERRY R.	
STREET ADDRESS	201 MAIN ST	
CITY-ST-ZIP	FT WORTH TX	
TITLE	D	<input type="checkbox"/> Delete
NAME	BASS, EDWARD P.	
STREET ADDRESS	201 MAIN ST	
CITY-ST-ZIP	FT WORTH TX	
TITLE	VCS	<input type="checkbox"/> Delete
NAME	COTHAM, W. ROBERT	
STREET ADDRESS	201 MAIN ST	
CITY-ST-ZIP	FT WORTH TX	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. 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 11 or Block 12 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

W. Robert + Cotham Vice President

2/9/00

817-390-8400

Daytime Phone #

CR2E034 (9/99)