

2002 UNIFORM BUSINESS REPORT (UBR)

7/1

FILED
Mar 03, 2002 8:00 am
Secretary of State

03-03-2002 90132 024 ***150.00

DOCUMENT # 855516
 1. Entity Name
BASS ENTERPRISES PRODUCTION CO.

Principal Place of Business Mailing Address
2300 FIRST CITY BANK TOWER **2300 FIRST CITY BANK TOWER**
201 MAIN STREET **201 MAIN STREET**
FT WORTH TX 76102 **FT WORTH TX 76102**

2. Principal Place of Business 3. Mailing Address
201 MAIN STREET **201 MAIN STREET**
 Suite, Apt. #, etc. Suite, Apt. #, etc.
SUITE 2300 **SUITE 2300**
 City & State City & State
FORT WORTH, TX **FORT WORTH, TX**

Zip Country Zip Country
76102 **USA** **76102** **USA**

4. FEI Number Applied For
75-1076930 Not Applicable
 5. Certificate of Status Desired **\$8.75** Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent
CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

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 _____ (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, 2002 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

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	HENRY, STEWART L	
STREET ADDRESS	201 MAIN ST	
CITY-ST-ZIP	FORT WORTH TX 76102	
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	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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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STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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 REQUIRED** **2/13/02** **817-390-8400**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: **W. ROBERT COTHAM VICE PRESIDENT** Daytime Phone #

CR2E034 (9/01)