

2005 LIMITED PARTNERSHIP ANNUAL REPORT

Due By May 1, 2005


FILED

2005 MAY 13 P 2:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



04122005 Chg-LP CR2E003 (10/03)

DOCUMENT # B94000000355			
1. Entity Name NALCO ENERGY SERVICES, L.P.			
Principal Place of Business 7701 HIGHWAY 90-A SUGAR LAND, TX 77478		Mailing Address 7701 HIGHWAY 90-A SUGAR LAND, TX 77478	
2. Principal Place of Business		3. Mailing Address 7701 HWY 90-A	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State SUGAR LAND, TX	
Zip	Country	Zip 77478	Country USA
4. FEI Number 76-0444295		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324		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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>			
9. Capital Contributions as Shown on record. \$388,946.00		10. Amount of Capital Contributions in FLORIDA to date. 520,590	
A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.			
12. GENERAL PARTNER INFORMATION		13. ADDRESS CHANGES ONLY	
DOCUMENT #	F94000004538	STREET ADDRESS	
NAME	NALCO ENERGY SERVICES, INC.	CITY-ST-ZIP	
STREET ADDRESS	7701 HIGHWAY 90-A		
CITY-ST-ZIP	SUGAR LAND, TX 77478		
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	700054492477
STREET ADDRESS			05/13/05--01016--010 **526.25
CITY-ST-ZIP			
DOCUMENT #		STREET ADDRESS	
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STREET ADDRESS			
CITY-ST-ZIP			
14. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes			
SIGNATURE: <i>Michael D. Murphy</i>		Date: 4/27/05	Daytime Phone #: 6303051000
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small>			

STAPLE CHECK HERE