2008 FOR PROFIT CORPORATION

DO NOT WRITE IN THIS SPACE

ANNUAL REPORT

DOCUMENT # F00000000896 1. Entity Name NORTRAN, INC.



FILED Jan 14, 2008 08:00 AM Secretary of State

Principal Place of Business

12404 PARK CENTRAL DR. SUITE 300 S DALLAS, TX 75251

Mailing Address

12404 PARK CENTRAL DR. SUITE 300 S

DALLAS, TX 75251



01042008

No Chg-P

CR2E034 (11/05)

4. FE! Number 93-0758029 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324

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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 (amiliar with, and accept the obligations of registered agent.

SIGNATURE.

(NOTE: Registered Agent aignature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be

01/16/08-80030-012 158.75

Alterin	ay 1, 2000 Fee Will be \$550.00	
10.	OFFICERS AND DIRECTORS	
TITLE .	PRES X SC %	
, name	GREER, RAYMOND B	
STREET ADDRESS	12404 PARK CENTRAL DRIVE, SUITE 300 SOUTH	
CITY-ST-ZIP	DALLAS, TX 75251	
TITLE	EVP	
NAME	HARTMAN, JIM	
STREET ADDRESS	12404 PARK CENTRAL DRIVE, SUITE 300 SOUTH	
CITY-ST-ZIP	DALLAS, TX 75251	
TITLE	EVP	
NAME	BISHOP, STEPHEN	
STREET ADDRESS	12404 PARK CENTRAL DRIVE, SUITE 300 SOUTH	
CITY-ST-ZIP	DALLAS, TX 75251	
TITLE	SEC	
NAME	HOVE, JOHN N	
STREET ADDRESS	12404 PARK CENTRAL DRIVE, SUITE 300 SOUTH	
CITY-ST-ZIP	DALLAS, TX 75251	
TRILE .	VP	
NAME '	CURTIS, DAN	
STREET ADDRESS	12404 PARK CENTRAL DRIVE, SUITE 300 SOUTH	
CITY-ST-ZIP	DALLAS, TX 75251	
TITLE	VP · · ·	
NAME	GANDHI, VIREN	
STREET ADDRESS	12404 PARK CENTRAL DRIVE, SUITE 300 SOUTH	
CITY-ST-ZIP	DALLAS, TX 75251	

DO:NOT:WRITE: IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 chapter 607 and attackment with an address, with all other like empowered.

SIGNATURE: A

D TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/08

972-228 - 73 9 7