

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**May 02, 2003 8:00 am**  
**Secretary of State**

05-02-2003 90128 025 \*\*\*150.00

**DOCUMENT # F00000004952**  
1. Entity Name  
**CENTERPOINT ENERGY GAS RESOURCES CORP.**

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business <b>1111 LOUISIANA</b> Suite, Apt. #, etc.	3. Mailing Address <b>1111 LOUISIANA</b> Suite, Apt. #, etc.
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City & State <b>HOUSTON TX</b>	City & State <b>HOUSTON TX</b>
Zip <b>77002</b>	Zip <b>77002</b>
Country <b>USA</b>	Country <b>USA</b>

4. FEI Number  
**74-1815597**

Applied For  
 Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

**DO NOT WRITE IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name  
**CT CORPORATION SYSTEM**

Street Address (P.O. Box Number is Not Acceptable)  
**1200 SOUTH PINE ISLAND ROAD**

City  
**PLANTATION**

FL Zip Code  
**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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

January 1 - May 1 Fee is \$150.00  
After May 1, Fee is \$550.00  
Amended UBR is \$61.25  
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>CHAIRMAN DAVID MCCLANAHAN 1111 LOUISIANA HOUSTON, TX 77002</b>	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>PRESIDENT WAYNE STINNETT, JR. 1111 LOUISIANA HOUSTON, TX 77002</b>	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>TREASURER MARC KILBRIDE 1111 LOUISIANA HOUSTON, TX 77002</b>	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>DO NOT WRITE IN THIS SPACE</b>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>SECRETARY SCOTT ROZZELL 1111 LOUISIANA HOUSTON, TX 77002</b>	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>VICE PRESIDENT BENJAMIN REESE 1111 LOUISIANA HOUSTON, TX 77002</b>	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>VICE PRESIDENT ROLLIE BOHALL 1111 LOUISIANA HOUSTON, TX 77002</b>	TITLE NAME STREET ADDRESS CITY - ST - ZIP	

12. 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 10 or on an attachment with an address with all other like empowered.

**SIGNATURE:** \_\_\_\_\_ **(713) 207-3000** **APR 28 2003**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034B (12/02)