

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 18, 2004 8:00 am
Secretary of State

03-18-2004 90014 021 ***150.00

DOCUMENT # F01000002014

1. Entity Name
RIVER ENGINEERED SYSTEMS, INC.



Principal Place of Business
**3500 NORTH CAUSEWAY BLVD., SUITE 210
METAIRIE, LA 70002**

Mailing Address
**500 DALLAS STREET
SUITE 1000
HOUSTON, TX 77002**

44018979



DO NOT WRITE IN THIS SPACE

01072004 No Chg-P CR2E034 (10/03)

4. FEI Number
72-1198156

Applied For
Not Applicable

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

6.-Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525**

**DO NOT WRITE
IN THIS SPACE**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

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
**C
KINDER, RICHARD D
500 DALLAS, SUITE 1000
HOUSTON, TX 77002**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
MORGAN, MICHAEL
500 DALLAS, SUITE 1000
HOUSTON, TX 77002**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
BETZ, DIXON
7116 HIGHWAY 22
SORRENTO, LA 70778**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**V
SHAPER, C. PARK
500 DALLAS, SUITE 1000
HOUSTON, TX 77002**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SVP
LISTENGART, JOSEPH
500 DALLAS, SUITE 1000
HOUSTON, TX 77002**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

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 Block 11 if changed, or on an attachment with an address, with all other like empowers.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**Joseph Listengart
Vice President**

3-15-04
Date

713-369-9000
Daytime Phone #