2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000003666

Entity Name: TV&C GP HOLDING, INC.

FILED Apr 15, 2008 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
9700 WEST GULF BANK ROAD HOUSTON, TX 77040				10707 CLAY ROAD SUITE 200 HOUSTON, TX 77041			
Current Mailing Address:				New Mailing Address:			
PO BOX 8749 PRINCETON, NJ 08543				10707 CLAY ROAD SUITE 200 HOUSTON, TX 77041			
FEI Number:	: 65-0952949	FEI Number Applied For()	FEI Num	nber Not Appli	icable ()	Certificate of Status E	Desired ()
Name and	Address of C	urrent Registered Agent:		Name and	Address of N	lew Registered Age	ent:
1200 SOU PLANTATI	PORATION SYS TH PINE ISLAN ION, FL 33324	ND ROAD US	rnoco ot	Fohanging it	re registered a	ffice or registered age	gent or both
	e of Florida.	submits this statement for the pur	pose oi	Changing it	.s registered o	illice of registered ag	jeni, or both,
SIGNATU	RE:						
	Electron	ic Signature of Registered Agent	t			Date	
Election Car	mpaign Financing	g Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	VACCARO, SAL	ILF BANK ROAD		Title: Name: Address: City-St-Zip:	DECKER, PATE	OAD SUITE 200	
Title: Name: Address: City-St-Zip:	MOROZE, M. B	ILF BANK ROAD		Title: Name: Address: City-St-Zip:	JENKINS, JOH	OAD SUITE 200	
Title: Name: Address: City-St-Zip:	ABROMEIT, RIC	ILF BANK ROAD		Title: Name: Address: City-St-Zip:	PARENT, JAME	OAD SUITE 200	
Title: Name: Address: City-St-Zip:	JENKINS, JOH	ILF BANK ROAD		Title: Name: Address: City-St-Zip:	COUGHLIN, CH) Change ()Addition IRISTOPHER J VP OAD SUITE 200 77041	
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	MACKAY, KEVI	OAD SUITE 200	
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	GOODRICH, AN	OAD SUITE 200	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TIMOTHY TIMMERMAN VP 04/15/2008