

**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 03, 2005 08:00 AM**  
**Secretary of State**

**DOCUMENT # F02000002639**

1. Entity Name  
**GENESIS ENERGY, INC.**



Principal Place of Business  
**500 DALLAS, SUITE 2500  
HOUSTON, TX 77002**

Mailing Address  
**500 DALLAS, SUITE 2500  
HOUSTON, TX 77002**



02212005 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**04-3667532**

Applied For  
Not Applicable

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

**6. Name and Address of Current Registered Agent**

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

**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2005 Fee will be \$550.00**

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

**10. OFFICERS AND DIRECTORS**

TITLE	CD
NAME	ROBERTS, GARETH
STREET ADDRESS	500 DALLAS, SUITE 2500
CITY-ST-ZIP	HOUSTON, TX 77002
TITLE	PD
NAME	GORMAN, MARK J
STREET ADDRESS	500 DALLAS, SUITE 2500
CITY-ST-ZIP	HOUSTON, TX 77002
TITLE	D
NAME	EVANS, RONALD T
STREET ADDRESS	500 DALLAS, SUITE 2500
CITY-ST-ZIP	HOUSTON, TX 77002
TITLE	D
NAME	GOODMAN, HERBERT I
STREET ADDRESS	500 DALLAS, SUITE 2500
CITY-ST-ZIP	HOUSTON, TX 77002
TITLE	SCFO
NAME	BENAVIDES, ROSS A
STREET ADDRESS	500 DALLAS, SUITE 2500
CITY-ST-ZIP	HOUSTON, TX 77002
TITLE	V
NAME	MAZUCH, KERRY W
STREET ADDRESS	500 DALLAS, SUITE 2500
CITY-ST-ZIP	HOUSTON, TX 77002

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03/03/05-80012-023 150.00

**DO NOT WRITE  
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 empowered.

**SIGNATURE:** Ross A. Benavides **Ross A. Benavides,**  
**Chief Financial Officer**

**2/23/05**

**713-860-2500**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #