

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 28, 2005 8:00 am
Secretary of State

01-28-2005 90022 005 ***150.00

DOCUMENT # F03000000217

1. Entity Name
TTGP, INC.



Principal Place of Business
1360 POST OAK, SUITE 2100
HOUSTON, TX 70056

Mailing Address
1360 POST OAK, SUITE 2100
HOUSTON, TX 70056

40008196



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01102005

Chg-P

CR2E034 (10/03)

City & State

City & State

4. FEI Number

76-0644267

Applied For
Not Applicable

Zip

Country

Zip

Country

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

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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, 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	PD	<input type="checkbox"/> Delete
NAME	HADDOX, JAMES H	
STREET ADDRESS	1360 POST OAK, SUITE 2100	
CITY-ST-ZIP	HOUSTON, TX 70056	
TITLE	V	<input type="checkbox"/> Delete
NAME	FERRO, JOHN	
STREET ADDRESS	4601 CLEVELAND ROAD	
CITY-ST-ZIP	SOUTH BEND, IN 46628	
TITLE	VDAS	<input type="checkbox"/> Delete
NAME	JENSEN, DERRICK A	
STREET ADDRESS	1360 POST OAK, SUITE 2100	
CITY-ST-ZIP	HOUSTON, TX 70056	
TITLE	VAS	<input type="checkbox"/> Delete
NAME	KUNKEMOELLER, PAMELA L	
STREET ADDRESS	1360 POST OAK, SUITE 2100	
CITY-ST-ZIP	HOUSTON, TX 70056	
TITLE	VAS	<input type="checkbox"/> Delete
NAME	O'BRIEN, PETER B	
STREET ADDRESS	1360 POST OAK, SUITE 2100	
CITY-ST-ZIP	HOUSTON, TX 70056	
TITLE	V	<input checked="" type="checkbox"/> Delete
NAME	PERSON, MICHAEL	
STREET ADDRESS	4601 CLEVELAND ROAD	
CITY-ST-ZIP	SOUTH BEND, IN 46628	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	VDAS	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Dana A. Gordon	
STREET ADDRESS	1360 Post Oak Blvd., Ste. 2100	
CITY-ST-ZIP	Houston, TX 77056	
TITLE	VAS	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	David D. Brittain	
STREET ADDRESS	1360 Post Oak Blvd., Ste. 2100	
CITY-ST-ZIP	Houston, TX 77056	
TITLE	AS	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Vincent A. Mercaldi	
STREET ADDRESS	1360 Post Oak Blvd., Ste. 2100	
CITY-ST-ZIP	Houston, TX 77056	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

Pamela L. Kunkemoeller
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Pamela L. Kunkemoeller 1-10-05

Date

Daytime Phone #