

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 25, 2008 8:00 am
Secretary of State

01-25-2008 90020 001 ***150.00

DOCUMENT # F07000005518

1. Entity Name
CCHM, INC.



Principal Place of Business
1001 FANNIN, SUITE 1350
HOUSTON, TX 77002

Mailing Address
1001 FANNIN, SUITE 1350
HOUSTON, TX 77002

40010050



01072008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
76-0515350

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

CT 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

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, 2008 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
P
SHORT, JIM G
1001 FANNIN, SUITE 1350
HOUSTON, TX 77002

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VPS
BELL, RENE F
1001 FANNIN, SUITE 1350
HOUSTON, TX 77002

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VPT
WOODS, CARLETTE
1001 FANNIN, SUITE 1350
HOUSTON, TX 77002

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
CHAMBERS, JAMIE
1001 FANNIN, SUITE 1350
HOUSTON, TX 77002

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
IAUNUZZO, JOHN
1001 FANNIN, SUITE 1350
HOUSTON, TX 77002

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
CHACHERE, JOHN
1001 FANNIN, SUITE 1350
HOUSTON, TX 77002

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jim G. Short, President

January 8, 2008

Date

(713) 871-5100

Daytime Phone #