

\$150

2005 FOR PROFIT CORPORATION ANNUAL REPORT

APPROVED
AND
FILED

05 MAY 10 PM 5:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA




04252005

Chg-P

CR2E034 (10/03)

MRD

DOCUMENT # F96000000731			
1. Entity Name LAMAR TEXAS GENERAL PARTNER, INC.			
Principal Place of Business 5551 CORPORATE BLVD., STE 2A BATON ROUGE, LA 70808		Mailing Address PO BOX 66338 P O BOX 66338 BATON ROUGE, LA 70896	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 72-1309003		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$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		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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD REILLY, KEVIN P JR. <input type="checkbox"/> Delete 5551 CORPORATE BLVD. 2-A BATON ROUGE, LA 70808	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ISTRE, KEITH A <input type="checkbox"/> Delete 5551 CORPORATE BLVD. 2-A BATON ROUGE, LA 70808	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MCILWAIN, JAMES <input type="checkbox"/> Delete 5551 CORPORATE BLVD. 2-A BATON ROUGE, LA 70808	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 100054847571 05/19/05--01019--003 **1350.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MARCHAND, GERALD H <input type="checkbox"/> Delete 5551 CORPORATE BLVD., STE. 2A BATON ROUGE, LA 70808	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP REILLY, SEAN <input type="checkbox"/> Delete 5551 CORPORATE BLVD. 2-A BATON ROUGE, LA 70808	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STEWART, T. EVERETT <input type="checkbox"/> Delete 5551 CORPORATE BLVD., STE. 2A BATON ROUGE, LA 70808	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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: <u>Keith Istre</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Date: <u>4/27/05</u> (225) 926-1000 <small>Daytime Phone #</small>	