

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

8337338  
FP

DOCUMENT # F97000001894

1. Entity Name  
ENRON PROCESSING PROPERTIES, INC.



**FILED**  
03 APR 16 AM 8:21  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



Principal Place of Business  
1400 SMITH ST  
HOUSTON TX 77002

Mailing Address  
C/O 1650 HWY 6  
SUITE 100  
SUGAR LAND TX 77478

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 76-0531858

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

NRAI SERVICES, INC.  
526 EAST PARK AVENUE  
TALLAHASSEE FL 32301

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, 2003 Fee will be \$550.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	VP	<input type="checkbox"/> Delete
NAME	GREEK, RICE L	
STREET ADDRESS	1400 SMITH	
CITY-ST-ZIP	HOUSTON TX 77002	
TITLE	AS	<input type="checkbox"/> Delete
NAME	PINDER-METZ, LORI	
STREET ADDRESS	1400 SMITH ST.	
CITY-ST-ZIP	HOUSTON TX 77002	
TITLE	PCD	<input type="checkbox"/> Delete
NAME	HORTON, STANLEY C	
STREET ADDRESS	1400 SMITH STREET	
CITY-ST-ZIP	HOUSTON TX 77002	
TITLE	CFOV	<input type="checkbox"/> Delete
NAME	HAYSLETT, RODERICK	
STREET ADDRESS	1400 SMITH STREET	
CITY-ST-ZIP	HOUSTON TX 77002	
TITLE	VPS	<input type="checkbox"/> Delete
NAME	DAVIS, ANGUS H	
STREET ADDRESS	1400 SMITH STREET	
CITY-ST-ZIP	HOUSTON TX 77002	
TITLE	DVGS	<input type="checkbox"/> Delete
NAME	FOSSUM, DREW J	
STREET ADDRESS	1400 SMITH ST.	
CITY-ST-ZIP	HOUSTON TX 77002	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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		
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		

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04/21/03--01074--020 \*\*150.00

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:

**SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

GREGORY M APKE

Attorney in Fact

4/10/03

Date

(221) 565-7905

Daytime Phone #

CR2E034 (10/02)