

**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 18, 2004 8:00 am**  
**Secretary of State**

03-18-2004 90014 019 \*\*\*150.00

**DOCUMENT # F99000002603**

1. Entity Name  
RIVER CONSULTING, INC.



Principal Place of Business  
3500 N. CAUSEWAY BLVD., SUITE 210  
METAIRIE, LA 70002

Mailing Address  
500 DALLAS STREET  
SUITE 1000  
HOUSTON, TX 77002

44018981



01072004 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
72-0927450

Applied For  
Not Applicable

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

**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, 2004 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  
C  
KINDER, RICHARD D  
500 DALLAS STREET SUITE 1000  
HOUSTON, TX 77002

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
MORGAN, MICHAEL  
500 DALLAS STREET SUITE 1000  
HOUSTON, TX 77002

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VP  
ARMSTRONG, JEFF  
500 DALLAS STREET SUITE 1000  
HOUSTON, TX 77002

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PCEO  
BETZ, DIXON B  
3500 N. CAUSEWAY BLVD., SUITE 210  
METAIRIE, LA 70002

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VPS  
LISTENGART, JOSEPH  
500 DALLAS STREET SUITE 1000  
HOUSTON, TX 77002

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
XD  
SHAPER, C PARK  
500 DALLAS STREET SUITE 1000  
HOUSTON, TX 77002

**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:**

Joseph Listengart  
Vice President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-15-04  
Date

713-369-9000  
Daytime Phone #