

# 2001 UNIFORM BUSINESS REPORT (UBR)

102a

DOCUMENT # **10701509 M-1509**

1. Entity Name  
**Enron LNG Marketing L.L.C.**

FILED

01 AUG -2 AM 8:47

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business  
**1400 Smith St.  
Houston, TX 77002**

Mailing Address  
**1400 Smith St. - 600 JF Room 11507  
Houston, TX 77002**

2. Principal Place of Business  
Suite, Apt. #, etc.

3. Mailing Address  
Suite, Apt. #, etc.

City & State

City & State

Zip Country

Zip Country

4. FEI Number  
**52-0406201**

Applied For  
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$5.00 Additional Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent  
**NPAI Services, Inc.  
526 E. 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.

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 \$50.00**  
**Make Check Payable to Department of State**

9. MANAGING MEMBERS / MEMBERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	Managing Director and General Tax Counsel <input type="checkbox"/> Delete <b>Robert J. Hermann 1400 Smith St. Houston, TX 77002</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Managing Director, Finance and Treasurer <input type="checkbox"/> Delete <b>Ben F. Glisan, Jr. 1400 Smith St. Houston, TX 77002</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Managing Director, General Counsel <input type="checkbox"/> Delete <b>Mark E. Baedicke 1400 Smith St. Houston, TX 77002</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

10. ADDITIONS / CHANGES

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition <b>(see attached)</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition <b>000004523640--3 -08/08/01--01019--003 *****50.00 *****50.00</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:  **July 31, 2001 (713) 853-6062**

CR2E083 (1/00)