

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M01000000420

FILED
Apr 14, 2009
Secretary of State

Entity Name: BERRY OPERATING COMPANY, LLC

Current Principal Place of Business:

1414 VALERO WAY
CORPUS CHRISTI, TX 78409

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 9908
CORPUS CHRISTI, TX 78469

New Mailing Address:

FEI Number: 74-2980954

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: MARTIN, EDWARD A
Address: 1414 VALERO WAY
City-St-Zip: CORPUS CHRISTI, TX 78409

Title: MGR () Delete
Name: BERRY, A L
Address: 5005 RIVERWAY S440
City-St-Zip: HOUSTON, TX 77056

Title: MGR () Delete
Name: BERRY, M G
Address: 1414 VALERO WAY
City-St-Zip: CORPUS CHRISTI, TX 78409

Title: MGR () Delete
Name: BERRY, D W
Address: 1414 VALERO WAY
City-St-Zip: CORPUS CHRISTI, TX 78409

Title: MGR () Delete
Name: BERRY, LAURA
Address: 1414 VALERO WAY
City-St-Zip: CORPUS CHRISTI, TX 78409

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: CHARLES A. VANAMAN

VP

04/14/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date