

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 30, 2004 8:00 am
Secretary of State

07-30-2004 90132 030 ****50.00

DOCUMENT # M03000000410



1. Entity Name
DORCHESTER MINERALS MANAGEMENT GP LLC

Principal Place of Business
**3738 OAK LAWN AVE.
 SUITE 300
 DALLAS TX, FL 75219**

Mailing Address
**3738 OAK LAWN AVE.
 SUITE 300
 DALLAS TX, FL 75219**



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

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

06022004 Chg-LLC CR2E083 (10/03)

City & State
Dallas, TX

City & State
Dallas, TX

4. FEI Number
81-0565475

Applied For
 Not Applicable

Zip Country
 Zip Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

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

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
 Signature, typed or printed name of registered agent and title if applicable.

**Filing Fee is \$50.00
 Due by September 8, 2004**

**Make check payable to
 Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MCMANEMIN, WILLIAM CASEY 3738 OAK LAWN AVE. DALLAS TX, FL 75219	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ALLEN, H.C. AM CASEY JR 3738 OAK LAWN AVE. DALLAS TX, FL 75219	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM RALEY, JAMES E 3738 OAK LAWN AVE. DALLAS TX, FL 75219	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM PEAK, PRESTON A 3738 OAK LAWN AVE. DALLAS TX, FL 75219	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM VAUGHN, ROBERT C 3738 OAK LAWN AVE. DALLAS TX, FL 75219	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 3738 Oak Lawn Avenue, Suite 300 Dallas, TX 75219
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Allen, Jr., H. C. 3738 Oak Lawn Avenue, Suite 300 Dallas, TX 75219
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 3738 Oak Lawn Avenue, Suite 300 Dallas, TX 75219
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 33738 Oak Lawn Avenue, Suite 300 Dallas, TX 75219
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 3738 Oak Lawn Avenue, Suite 300 Dallas, TX 75219
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: *James E. Raley* **JAMES E. RALEY, COO** **JUL 26 2004 972-864-8610**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #