

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 18, 2005 08:00 AM
Secretary of State

DOCUMENT # M04000004013

1. Entity Name
J. WORTHAM, L.L.C.



Principal Place of Business
2727 ALLEN PARKWAY
HOUSTON, TX 77019

Mailing Address
2727 ALLEN PARKWAY
HOUSTON, TX 77019



01282005No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
16-1642654

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

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

**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 _____

**Filing Fee is \$50.00
Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	BURNS, FRED C
STREET ADDRESS	2727 ALLEN PARKWAY
CITY-ST-ZIP	HOUSTON, TX 77019
TITLE	MGR
NAME	BLADES, RICHARD M
STREET ADDRESS	2727 ALLEN PARKWAY
CITY-ST-ZIP	HOUSTON, TX 77019
TITLE	MGR
NAME	COOK, JOHN T
STREET ADDRESS	2727 ALLEN PARKWAY
CITY-ST-ZIP	HOUSTON, TX 77019
TITLE	MGR
NAME	DAVIS, JAMES R
STREET ADDRESS	2727 ALLEN PARKWAY
CITY-ST-ZIP	HOUSTON, TX 77019
TITLE	MGR
NAME	FLOURNOY, CHARLES H
STREET ADDRESS	2727 ALLEN PARKWAY
CITY-ST-ZIP	HOUSTON, TX 77019
TITLE	MGR
NAME	GUGGOLZ, WILLIAM H JR
STREET ADDRESS	2727 ALLEN PARKWAY
CITY-ST-ZIP	HOUSTON, TX 77019

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U00000234685
02/18/05-80031-010 50.00

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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

H. L. Shipman H. L. SHIPMAN 2/15/05 (713) 526-3366