

**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 21, 2004 08:00 AM
Secretary of State

DOCUMENT # M95000000002

1. Entity Name
PRESTON OIL LIMITED LIABILITY COMPANY, L.C.



Principal Place of Business
**1717 WOODSTEAD COURT, SUITE 207
THE WOODLANDS, TX 77380**

Mailing Address
**1717 WOODSTEAD COURT, SUITE 207
THE WOODLANDS, TX 77380**



05132004 No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
76-0424155

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 relinquishing) DATE _____

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

U00000151252
05/21/04-80006-017 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
GENTZLER, RONALD G
1717 WOODSTEAD COURT, SUITE 207
THE WOODLANDS, TX 77380**

TITLE
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STREET ADDRESS
CITY-ST-ZIP

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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: *Ronald G. Gentzler* **Ronald G. Gentzler 5/17/04 281-367-8697**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE **General Manager** Daytime Phone #