

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P05057

1. Entity Name

LOUISIANA BASIC INDUSTRIES, INC.

FILED
Mar 03, 2000 8:00 am
Secretary of State

03-03-2000 90207 046 ***150.00

Principal Place of Business

Mailing Address

15981 AIRLINE HIGHWAY
 BATON ROUGE LA 70817-7412

15981 AIRLINE HIGHWAY
 BATON ROUGE LA 70817-7412



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

72-0806824

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
 1200 S. 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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P	<input type="checkbox"/> Delete
NAME	ANDERSON, DAN	
STREET ADDRESS	4016 BLECKER	
CITY-ST-ZIP	BATON ROUGE LA	
TITLE	ST	<input type="checkbox"/> Delete
NAME	BORDELON, DEAN	
STREET ADDRESS	6250 FEATHER NEST	
CITY-ST-ZIP	BATON ROUGE LA 70817	
TITLE	D	<input type="checkbox"/> Delete
NAME	ANDERSON, R. L.	
STREET ADDRESS	3333 MCCARROLL DR.	
CITY-ST-ZIP	BATON ROUGE LA	
TITLE	D	<input type="checkbox"/> Delete
NAME	WALKER, JOHN D.	
STREET ADDRESS	12721 ARLINGFORD AVE	
CITY-ST-ZIP	BATON ROUGE LA	
TITLE	D	<input type="checkbox"/> Delete
NAME	BOURGEOIS, RONALD J.	
STREET ADDRESS	221 E. WOODSTONE CT.	
CITY-ST-ZIP	BATON ROUGE LA	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

CR2E034 (9/99)

13. 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 or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Dean Bordelon

2/2/00

225-756-7630

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #