2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

DO NOT WRITE IN THIS SPACE

DOCUMENT # P07611

1. Entity Name SID R. BASS, INC.



Principal Place of Business

201 MAIN STREET **SUITE 2300**

FT. WORTH, TX 76102

Mailing Address

201 MAIN STREET SUITE 2300

FT. WORTH, TX 76102

FILED Feb 09, 2004 8:00 am Secretary of State

02-09-2004 90046 048 ***150.00



01152004

No Cha-P

CR2E034 (10/03)

4. FEI Number 75-2026351

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM 1200 S PINE ISLAND RD. PLANTATION, FL 33324

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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)

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

OFFICERS AND DIRECTORS 10. D TITLE BASS, SID R. NAME STREET ADDRESS 201 MAIN STREET CITY-ST-ZIP FT. WORTH, TX TITLE COTHAM, W. ROBERT NAME STREET ADDRESS 201 MAIN STREET CITY-ST-ZIP FT. WORTH, TX TITLE NAME HENRY, STEWART L STREET ADDRESS 201 MAIN STREET CITY+ST-ZIP FORT WORTH, TX 76102 TITLE REESE, GARY W. NAME STREET ADDRESS 201 MAIN STREET CITY-ST-ZIP FT. WORTH, TX TITLE KELLY, JR., DEE J. NAME STREET ADDRESS 201 MAIN STREET CITY-ST-ZIP FT. WORTH, TX STERLING, PETER NAME STREET ADDRESS 201 MAIN STREET CITY-ST-ZIP FT. WORTH, TX

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12. I hereby certify that the information supplied with this filling 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 five 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 employered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other line employeded. changed, or on an attachment with an address

SIGNATURE:

817-390-8400