

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 13, 2004 8:00 am
Secretary of State

02-13-2004 90007 024 ***150.00

DOCUMENT # P07613

1. Entity Name
THRU LINE INC.



Principal Place of Business
**201 MAIN STREET
STE 2300
FT. WORTH, TX 76102**

Mailing Address
**201 MAIN STREET
STE 2300
FT. WORTH, TX 76102**

04005927



01152004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
75-2000569

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
1200 S. 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 _____

**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**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BASS, E.P. 201 MAIN STREET FT. WORTH, TX
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS COTHAM, W. ROBERT 201 MAIN STREET FT. WORTH, TX
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T REESE, GARY W 201 MAIN STREET FT WORTH, TX
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VAS GREVE, JAMES 201 MAIN STREET FT. WORTH, TX
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VAS HALLMAN, WILLIAM P, JR 201 MAIN ST FT WORTH, TX
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR **W. ROBERT COTHAM VICE PRESIDENT** Daytime Phone #

817-390-8400

Certified Article Number