

**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 15, 2005 08:00 AM**  
**Secretary of State**

**DOCUMENT # P07614**

1. Entity Name  
**LEE M. BASS, INC.**



Principal Place of Business

**201 MAIN ST  
SUITE 2300  
FT. WORTH, TX 76102**

Mailing Address

**201 MAIN ST  
SUITE 2300  
FT. WORTH, TX 76102**



01252005 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**75-2024816**

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, 2005 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  
**VPF  
PETER STERLING  
201 MAIN STREET, SUITE 2300  
FORT WORTH, TX**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**VD  
COTHAM, W. ROBERT  
201 MAIN STREET  
FT. WORTH, TX**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**V  
GREVE, JAMES  
201 MAIN STREET  
FT. WORTH, TX**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**P  
HENRY, STEWART  
201 MAIN STREET  
FORT WORTH, TX 76102**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**T  
REESE, GARY W  
201 MAIN S T.  
FT. WORTH, TX**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

110000231677  
02/15/05-00051-025 150.00

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 reports 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**

**2/3/05**

**817-390-8400**

Daytime Phone #

**Certified Article Number**