

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **P13882** (6)  
1. Corporation Name  
**THE HANOVER COMPANY OF DELAWARE**

Principal Place of Business

**5847 SAN FELIPE  
SUITE 3600  
HOUSTON TX 77057  
US**

Mailing Address

**5847 SAN FELIPE  
SUITE 3600  
HOUSTON TX 77057-3011  
US**

FILED  
Apr 17 1997 8:00am  
Secretary of State



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

3. Date Incorporated or Qualified

**04/02/1987**

3a. Date of Last Report

**04/10/1996**

4. FEI Number

**76-0203336**

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75** Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

**\$5.00** May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

☐ Yes ☐ No

9. Name and Address of Current Registered Agent

**SMITH, MACKINNON, MATTHEWS, ET AL  
255 S. ORANGE AVENUE, S-850  
ORLANDO FL 32801**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

**FL**

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
COB	BOWDEN, J. MURRY	5847 SAN FELIPE, #3600	HOUSTON TX	<input type="checkbox"/>
COB	BERGERON, BEN D.	5847 SAN FELIPE, #3600	HOUSTON TX	<input type="checkbox"/>
AS	MARTINO, VERA	5847 SAN FELIPE #3600	HOUSTON TX	<input type="checkbox"/>
VPTS	THOMPSON, MICHAEL D.	5847 SAN FELIPE, #3600	HOUSTON TX	<input checked="" type="checkbox"/>
PAS	FATHEREE, JAMES L	5847 SAN FELIPE, SUITE 3600	HOUSTON TX	<input type="checkbox"/>
VP	BUCHANAN, BO	5847 SAN FELIPE, SUITE 3600	HOUSTON TX	<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	1.5 Change	1.6 Addition
D			HOUSTON, TX 77057	<input checked="" type="checkbox"/>	<input type="checkbox"/>
D			HOUSTON, TX 77057	<input checked="" type="checkbox"/>	<input type="checkbox"/>
S	KATHY K. BINFORD		HOUSTON, TX 77057	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
P	JOHN H. NASH		HOUSTON, TX 77057	<input checked="" type="checkbox"/>	<input type="checkbox"/>
T			HOUSTON, TX 77057	<input checked="" type="checkbox"/>	<input type="checkbox"/>

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/21/97

(713) 247-2100

0495503

CR2E034 (9/96)