

TX2016 05-102
Ver. 7.0 (Rev.9-15/33)

Texas Franchise Tax Public Information Report
To be filed by Corporations, Limited Liability Companies (LLC), Limited Partnerships (LP),
Professional Associations (PA) and Financial Institutions

■ Tcode 13196

■ Taxpayer number **30010613385** ■ Report year **2016**

You have certain rights under Chapter 552 and 559, Government Code, to review, request and correct information we have on file about you. Contact us at 1-800-252-1381.

Taxpayer name **WESTHILL INC** Check box if the mailing address has changed.
Mailing address **1800 BERING STE 945** Secretary of State (SOS) file number or Comptroller file number **0104219400**
City **Houston** State **TX** ZIP code plus 4 **77057**

Check box if there are currently no changes from previous year; if no information is displayed, complete the applicable information in Sections A, B and C.

Principal office **1800 BERING STE 945 Houston TX 77057**
Principal place of business **1800 BERING STE 945 Houston TX 77057**

You must report officer, director, member, general partner and manager information as of the date you complete this report.



3001061338516

Please sign below! This report must be signed to satisfy franchise tax requirements.

SECTION A Name, title and mailing address of each officer, director, member, general partner or manager.

| Name | Title | Director | Term expiration |
|--|-----------------|---|----------------------------|
| JOE F WHEAT | SEC TREAS | <input checked="" type="checkbox"/> YES | m m d d y y 1 2 3 1 1 7 |
| Mailing address 2600 CITADEL PLAZA DR STE 105 | City Houston | State TX | ZIP Code 77008 |
| ALAN SHELBY | PRES | <input checked="" type="checkbox"/> YES | m m d d y y 1 2 3 1 1 7 |
| Mailing address 1800 BERING STE 945 | City Houston | State TX | ZIP Code 77057 |
| PEDRO BENITEZ | V PRES ADM | <input checked="" type="checkbox"/> YES | m m d d y y 1 2 3 1 1 7 |
| Mailing address 1800 BERING STE 945 | City Houston | State TX | ZIP Code 77057 |

SECTION B Enter information for each corporation, LLC, LP, PA or financial institution, if any, in which this entity owns an interest of 10 percent or more.

| Name of owned (subsidiary) corporation, LLC, LP, PA or financial institution | State of formation | Texas SOS file number, if any | Percentage of ownership |
|--|--------------------|-------------------------------|-------------------------|
| | | | |
| | | | |

SECTION C Enter information for each corporation, LLC, LP, PA or financial institution, if any, that owns an interest of 10 percent or more in this entity.

| Name of owned (parent) corporation, LLC, LP, PA or financial institution | State of formation | Texas SOS file number, if any | Percentage of ownership |
|--|--------------------|-------------------------------|-------------------------|
| | | | |

Registered agent and registered office currently on file (see instructions if you need to make changes)
Agent: **JOE F WHEAT** You must make a filing with the Secretary of State to change registered agent, registered officer or general partner information.
Office: **2600 CITADEL PLAZA DR STE 105** City **Houston** State **TX** ZIP Code **77008**

The information on this form is required by Section 171.203 of the Tax Code for each corporation LLC, LP, PA or financial institution that files a Texas Franchise Tax Report. Use additional sheets for Sections A, B and C, if necessary. The information will be available for public inspection.

I declare that the information in this document and any attachments is true and correct to the best of my knowledge and belief, as of the date below, and that a copy of this report has been mailed to each person named in this report who is an officer, director, member, general partner or manager and who is not currently employed by this or a related corporation, LLC, LP, PA or financial institution.

sign here **Ala Shell** Title **OFFICER** Date **02/22/2016** Area code and phone number **() -**

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Tcode 13196

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| <input checked="" type="checkbox"/> Taxpayer number | <input checked="" type="checkbox"/> Report year |
| 30010613385 | 2016 |

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| | | | |
|--|-------------|---|--|
| Taxpayer name WESTHILL INC | | <input type="checkbox"/> Check box if the mailing address has changed. | |
| Mailing address 1800 BERING STE 945 | | Secretary of State (SOS) file number or Comptroller file number 0104219400 | |
| City Houston | State TX | ZIP code plus 4 77057 | |

Check box if there are currently no changes from previous year; if no information is displayed, complete the applicable information in Sections A, B and C.

| |
|---|
| Principal office 1800 BERING STE 945 Houston TX 77057 |
| Principal place of business 1800 BERING STE 945 Houston TX 77057 |

You must report officer, director, member, general partner and manager information as of the date you complete this report.



Please sign below! This report must be signed to satisfy franchise tax requirements.

SECTION A Name, title and mailing address of each officer, director, member, general partner or manager.

| | | | |
|--|---------------------|--|---|
| Name CARLOS J de la GARZA | Title VP DEVELOP | Director <input type="checkbox"/> YES | Term expiration m m d d y y 1 2 3 1 1 7 |
| Mailing address 1800 BERING STE 945 | City Houston | State TX | ZIP Code 77057 |
| Name | Title | Director <input type="checkbox"/> YES | Term expiration m m d d y y |
| Mailing address | City | State | ZIP Code |
| Name | Title | Director <input type="checkbox"/> YES | Term expiration m m d d y y |
| Mailing address | City | State | ZIP Code |

SECTION B Enter information for each corporation, LLC, LP, PA or financial institution, if any, in which this entity owns an interest of 10 percent or more.

| | | | |
|--|--------------------|-------------------------------|-------------------------|
| Name of owned (subsidiary) corporation, LLC, LP, PA or financial institution | State of formation | Texas SOS file number, if any | Percentage of ownership |
| Name of owned (subsidiary) corporation, LLC, LP, PA or financial institution | State of formation | Texas SOS file number, if any | Percentage of ownership |

SECTION C Enter information for each corporation, LLC, LP, PA or financial institution, if any, that owns an interest of 10 percent or more in this entity.

| | | | |
|--|--------------------|-------------------------------|-------------------------|
| Name of owned (parent) corporation, LLC, LP, PA or financial institution | State of formation | Texas SOS file number, if any | Percentage of ownership |
|--|--------------------|-------------------------------|-------------------------|

| | | | |
|---|------|---|----------|
| Registered agent and registered office currently on file (see instructions if you need to make changes) | | You must make a filing with the Secretary of State to change registered agent, registered officer or general partner information. | |
| Agent: | City | State | ZIP Code |
| Office: | | | |

The information on this form is required by Section 171.203 of the Tax Code for each corporation LLC, LP, PA or financial institution that files a Texas Franchise Tax Report. Use additional sheets for Sections A, B and C, if necessary. The information will be available for public inspection.

I declare that the information in this document and any attachments is true and correct to the best of my knowledge and belief, as of the date below, and that a copy of this report has been mailed to each person named in this report who is an officer, director, member, general partner or manager and who is not currently employed by this or a related corporation, LLC, LP, PA or financial institution.

| | | | |
|-----------|------------------|--------------------|-------------------------------------|
| sign here | Title OFFICER | Date 02/22/2016 | Area code and phone number () - |
|-----------|------------------|--------------------|-------------------------------------|

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| VE/DE <input type="checkbox"/> | PIR IND <input type="checkbox"/> |
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