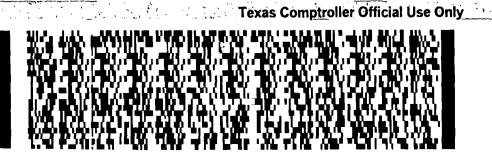
Filing Number: 104219400

	ranchise Tax		•		
03-102	rations, Limited Liabii				
(Rev.9-11/30) This report MU ■ Tcode 13196	JST be signed and fil	ed to satisfy franc	chise tax requiren	ients	
■ Taxpayer number	■ Report year				nd 559, Government Code,
30010613385	2012		quest, and correct infor t (800) 252-1381 or (512		on file about you.
Taxpayer name WESTHILL, INC. Mailing address				Secretary of St:	ate (SOS) file number or
1800 BERING , SUITE 945	00 BERING ,SUITE 945			Comptroller file number	
City HOUSTON TX		77057	Plus 4	0104219	
Check box if there are currently no changes from previous year	; if no information is displa	ayed, complete the app	licable information in S	Sections A, B an	d C.
Principal office 1800 BERING STE 945, HOUSTON, TX Principal place of business	77057		1		
1800 BERING STE 945, HOUSTON, TX	77057		ĺ		
Please sign below! Officer, director and member informat Report is completed. The information report. There is no requirement or proofficers, directors, or members change	is updated annually as par ocedure for supplementing	t of the franchise tax	n	30010	061338512
SECTION A Name, title and mailing address of e		or member.			
Name	Title	l	Director	m	mddyy
WHEAT, JOE F.	S/TREAS		X Yes expir	ation 123	111
Mailing address	City	·	State	;	ZIP Code
2707 N. LOOP WEST #380	HOUSTON		Discotos	TX	77008
Name	Title	į	Director Term	<i>m</i> 1	mddyy
SHELBY, ALAN	PRES		X Yes expir		
Mailing address	City		State	e TX	ZIP Code
1800 BERING DRIVE #495 Name	HOUSTON Title	Ī	Director	1 V	77057 m d d y y
	W/DDEG		X Yes expir	ation 123	111
BENITEZ, PEDRO Mailing address	V/PRES City	ı	State	•	ZIP Code
1800 BERING DRIVE #495	HOUSTON			TX	77057
SECTION B Enter the information required for each corpo	ration or LLC, if any, in wh	ich this entity owns an	interest of 10 percent	or more.	
Name of owned (subsidiary) corporation or limited liability company	State of form	nation	Texas SOS file numb	er, if any	Percentage of ownership
Name of owned (subsidiary) corporation or limited liability company	State of form	nation	Texas SOS file numb	er, if any	Percentage of ownership
SECTION C Enter the information required for each corpoliability company.	f ration or LLC, if any, that o	owns an interest of 10	l percent or more in this	entity or limiter	1
Name of owned (parent) corporation or limited liability company None	State of fo	rmation	Texas SOS file numb	er, if any	Percentage of ownership
Registered agent and registered office currently on file. (see instruct Agent: $JOE\ F$. WHEAT	ctions if you need to make o	:hanges)	Check box if you the registered a	u need forms to agent or register	change ed office information.
Office: 2600 CITADEL PLAZA DRIVE,	SUITE 105	City HOUSTON	Ī	State	ZIP Code TX 7700
The above information is required by Section 171.203 of the Tax Code for Sections A, B, and C, if necessary. The information will be available	for each corporation or limit	ted liability company that	at files a Texas Franchi	se Tax Report. U	se additional sheets
declare that the information in this document and any attachments is been mailed to each person named in this report who is an officer, di	s true and correct to the bes	t of my knowledge and s not currently employe	belief, as of the date be d by this, or a related, c	low, and that a co	opy of this report has ited liability company.
sign - Was WW	Title W		Date 2/12/18	Area	3 975 2 825



VE/DE O PIR IND

