

2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P37368

Entity Name: R. R. CASSIDY, INC.**Current Principal Place of Business:**37471 HIGHWAY 427
PRAIRIEVILLE, LA 70769**Current Mailing Address:**2800 POST OAK BOULEVARD
SUITE 2600
HOUSTON, TX 77056 US**FEI Number:** 72-0957920**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 US*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.***SIGNATURE:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title DIRECTOR, VP, SECRETARY
Name CAMPBELL, CAROLYN M.
Address 2800 POST OAK BOULEVARD
SUITE 2600
City-State-Zip: HOUSTON TX 77056

Title DIRECTOR, VP
Name UPPERMAN, DOROTHY C
Address 2800 POST OAK BOULEVARD
SUITE 2600
City-State-Zip: HOUSTON TX 77056

Title DIRECTOR, ASST. SECRETARY
Name LEMON, JERRY K
Address 2800 POST OAK BOULEVARD
SUITE 2600
City-State-Zip: HOUSTON TX 77056

Title PRESIDENT
Name AUSTIN, DAREN E
Address 1608 MARGARET STREET
City-State-Zip: HOUSTON TX 77093

Title VP
Name CASSIDY, BEN R
Address 37471 HIGHWAY 427
City-State-Zip: PRAIRIEVILLE LA 70769

Title VP
Name CASSIDY, RANDOLPH BOLTON (BO)
Address 37471 HIGHWAY 427
City-State-Zip: PRAIRIEVILLE LA 70769

Title ASST. SECRETARY
Name SANTOS, CLAUDIA G
Address 2800 POST OAK BOULEVARD
SUITE 2600
City-State-Zip: HOUSTON TX 77056

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: CLAUDIA G. SANTOS**ASSISTANT SECRETARY** 05/20/2020_____
Electronic Signature of Signing Officer/Director Detail_____
Date