

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra R. Mortimer  
Secretary of State  
DIVISION OF CORPORATIONS

APPROVED  
AND  
FILED

95 APR 28 AM 10:08

DOCUMENT # **826678** (5)

1. Corporation Name  
**MANHATTAN CONSTRUCTION COMPANY**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business Mailing Address  
**111 WEST FIFTH ST  
STE 1000  
TULSA OK 74119**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **08/27/1971** 3a. Date of Last Report **04/07/1994**

2. Principal Place of Business 2a. Mailing Address

4. FEI Number **73-0338330** Applied For Not Applicable

21 Suite, Apt. #, etc 26 Suite, Apt. #, etc

5. Certificate of Status Desired  \$8.75 Additional Fee Required

22 City & State 27 City & State

6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees

23 Zip Country 28 Zip Country

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes  Yes  No

24 Zip Country 29 Zip Country 30 Zip Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION FL 33324**

B1 Name  
B2 Street Address (P.O. Box Number is Not Acceptable)  
B3  
B4 City  
FL B5 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) (see note)

(B&C) Registered Agent fee shall be paid when registering.

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PD
NAME	ROONEY, L.F. III
STREET ADDRESS	111 W. FIFTH ST., SUITE 1000
CITY, ST, ZIP	TULSA OK
TITLE	S
NAME	LAWSON, JIM W.
STREET ADDRESS	P.O. BOX 949 N/A
CITY, ST, ZIP	MUSKOGEE OK
TITLE	V
NAME	FERGUSON, CURTIS
STREET ADDRESS	2120 MONTROSE BLVD
CITY, ST, ZIP	HOUSTON, TX 0
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

11 TITLE	CEO & Director	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME		
13 STREET ADDRESS		
14 CITY, ST, ZIP		
21 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME		
23 STREET ADDRESS		
24 CITY, ST, ZIP		
31 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME		
33 STREET ADDRESS		
34 CITY, ST, ZIP		
41 TITLE	President & Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
42 NAME	Tim P. Rooney	
43 STREET ADDRESS	3890 W. Northwest Hwy., Suite 100	
44 CITY, ST, ZIP	Dallas, TX 75220	
51 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME		
53 STREET ADDRESS		
54 CITY, ST, ZIP		
61 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME		
63 STREET ADDRESS		
64 CITY, ST, ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(2)(b), 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 or in an attachment with an address.

SIGNATURE: *Jim W. Lawson* / Jim W. Lawson 4-24-95 918-687-7561  
Signature AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date