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

CORPORATION **ANNUAL REPORT**

1997



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS **FILED**

Apr 02 1997 8:00am

Secretary of State

DOCUMENT # F9400006439 (3)

Principal Place 8023 E. 63RD SUITE 730 TULSA OK 741	PL.	Mailing Address 8023 E. 63RD PL. SUITE 730 TULSA OK 74133-1209			
	•			3. Date Incorporated or Qualified	3a. Date of Last Report
A Date of all D		1 6 74 9		12/16/1994	03/07/1996
—	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt.	# atc	26		73-1303802	Not Applicable \$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State	6	City & State		6. Election Campaign Financing	\$5.00 May Be
Zip	Country		Country	Trust Fund Contribution	☐ Addod to Fees
24	25	- F ™ 1	30	8. This corporation has liability for in Florida Statutes	tangible tax under s. 199,032, Yes \tag{ No}
24	9. Name and Address of Curren		1301	10. Name and Address of New Reg	
TAI	HAM, TOBIAS B JR	1 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	81 Name		
565 KINGSLEY AVE. ORANGE PARK FL 32073			82 Street Addr	ress (P.O. Box Number is Not Acceptable	
			62 Street Addi	ess (F.O. Box Number is Not Acceptable	⁽²⁾
			83		
			84 City		 85 Z _{ID} Code
			1 1 7		FL
11. Pursuant I office or re agent. I as SIGNATURE	to the provisions of Sections 607.050; egisterod agent, or both, in the State in familiar with, and accept the obliga	2 and 607.1508, Florida Statuti of Florida. Such change was a dions of, Section 607.0505, Florida	es, the above-named corp authorized by the corporal brida Statules.	poration submits this statement for the puicon's board of directors. I hereby accept	rpose of changing its registered the appointment as registered
	Signature, typicd or printed name of registered ager		f : Hegisterad Agent signature requir		DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICE	
TITLE	PD	DELETE	1.1 TIPLE		L_] Change L_ Addition
NAME STREET ADDRESS	LATHAM, TOBIAS B III 5608 E. 101ST PL.		1.2 NAME 1.3 STHEET ADDRESS		1
	TULSA OK 74137				
CITY-ST-ZIP TITLE	VSD	DELETE	1.4 CITY-ST-ZIP 2.1 TIBLE		Change Addition
NAME	RICHARDSON, RUSSELL A		22 NAME		
STREET ADDRESS	8005 S. FULTON AVE.		2.3 STREET ADDRESS		
CITY-ST-ZIP	TULSA OK 74136		2. 4 CITY - S1 - ZIP		
TITLE	`	DELETE	3.1 TOUF		Change Addition
NAME			32 NAME		
STREET ADDRESS			3.3 STHEET ADDRESS		
CITY-ST-ZIP			3.4 CITY-ST-ZIP		
TITLE		DELETE	4.1 117LF		Change Addition
NAME			4 2 NAML		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - S1 - ZIP		
TITLE		DELETE	5.1 TOLE		Change Addition
NAME			52 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		ł
CITY-ST-ZIP		The second	5 4 Cily-SI-ZIP		
TITLE		DETETE	6.1 TITLE		L. Change L. Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		

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.