

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

FILED
Apr 22 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 231384 (9)

1. Corporation Name
FISHHAWK RANCH, INC.



Principal Place of Business ONE WILLIAMS CENTER P.O. BOX 2400 TULSA OK 74102	Mailing Address ONE WILLIAMS CENTER P.O. BOX 2400 TULSA OK 74102
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	Suite, Apt. #, etc.
22 City & State	City & State
23 Zip	Zip
24 Country	25 Country
26 City & State	27 City & State
28 Zip	29 Zip
30 Country	Country

3. Date Incorporated or Qualified 12/23/1959	
4. FEI Number 59-6060550	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent

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

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VDTA <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BAILEY, KEITH E.	1.2 NAME	
STREET ADDRESS	1 WILLIAMS CENTER	1.3 STREET ADDRESS	
CITY-ST-ZIP	TULSA OK	1.4 CITY-ST-ZIP	
TITLE	PD <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BUMGARNER, J. C., JR.	2.2 NAME	
STREET ADDRESS	1 WILLIAMS CENTER	2.3 STREET ADDRESS	
CITY-ST-ZIP	TULSA, OK 0	2.4 CITY-ST-ZIP	
TITLE	VAST <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VON GLAHN, WILLIAM G	3.2 NAME	
STREET ADDRESS	1 WILLIAMS CENTER	3.3 STREET ADDRESS	
CITY-ST-ZIP	TULSA OK	3.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MCCARTHY, JACK D	4.2 NAME	
STREET ADDRESS	1 WILLIAMS CENTER	4.3 STREET ADDRESS	
CITY-ST-ZIP	TULSA OK	4.4 CITY-ST-ZIP	
TITLE	S <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HIGBEE, D.M.	5.2 NAME	
STREET ADDRESS	1 WILLIAMS CENTER	5.3 STREET ADDRESS	
CITY-ST-ZIP	TULSA, OK 0	5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I 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 the attachment with an address.

CR2E034 (10/97)