

# 2001 UNIFORM BUSINESS REPORT (UBR)

UBR 5

**DOCUMENT #** A07158  
**1. Entity Name**  
 WJA REALTY LIMITED PARTNERSHIP

**FILED**  
 01 AUG -9 PM 1:35  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

**Principal Place of Business**  
 15 E. 5TH ST., STE 4030  
 TULSA OK 74103

**Mailing Address**  
 PO BOX 1439  
 TULSA OK 74101-1439



**2. Principal Place of Business**

**3. Mailing Address**  
 WJA Realty Limited  
 Suite, Apt. #, etc.  
 4033 S. YORKTOWN PLACE  
 City & State  
 TULSA, OK  
 Zip  
 74105  
 Country  
 USA

**DUE BY SEPTEMBER 26, 2001**

**4. FEI Number** 04-2632298  
 Applied For  
 Not Applicable

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

**6. Name and Address of Current Registered Agent**  
 DONOVAN, RICHARD P  
 14535 N.W. 60TH AVE.  
 HIALEAH FL 33014-2808

**7. Name and Address of New Registered Agent**  
 Name  
 Corporation Service Company  
 Street Address (P.O. Box Number is Not Acceptable)  
 1201 Hays Street  
 City  
 Tallahassee  
 FL  
 Zip Code  
 32301

**8. 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** *Maureen Cullen* Maureen Cullen, Asst. V.P. August 8, 2001  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**9. Capital Contributions as Shown on record.** \$9,900,000.00  
**10. Amount of Capital Contributions in FLORIDA to date.** \$9,900,000.00  
**11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION**

**A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.**  
**NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.**

**12. GENERAL PARTNER INFORMATION**

DOCUMENT #	NAME	STREET ADDRESS	CITY-ST-ZIP
	WHEELER, DAVID B	5809 CARRYBACK LANE	AUSTIN TX
F93000000466	E.H.P. CORPORATION	PO BOX 1439	TULSA OK

**13. ADDRESS CHANGES ONLY**

STREET ADDRESS	CITY-ST-ZIP
	800004534988--5 -08/15/01--01015--003 ****926.25 ****926.25

**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 report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes**

**SIGNATURE:** *David B. Wheeler* David B. Wheeler, President 7/26/02  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

CFR2E003 (5/01)