

2002 UNIFORM BUSINESS REPORT (UBR)

FILED

02 MAY -1 PM 6:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

0020157 AB

DOCUMENT # **A07158**

1. Entity Name

WJA REALTY LIMITED PARTNERSHIP

Principal Place of Business

15 E. 5TH ST., STE 4030
TULSA OK 74103

Mailing Address

4033 SOUTH YORKTOWN PLACE
TULSA OK 74105



2. Principal Place of Business

3. Mailing Address

4033 South Yorktown Place
Suite, Apt. #, etc.

Suite, Apt. #, etc.

DUE BY MAY 1, 2002

City & State

Tulsa, Oklahoma

City & State

4. FEI Number

04-2632298

Applied For

Not Applicable

Zip
74105

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

~~CORPORATION-SERVICE COMPANY~~
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

DATE

9. Capital Contributions
as Shown on record.

9,900,000.00

10. Amount of Capital Contributions
in FLORIDA to date.

57,446.06

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

13. ADDRESS CHANGES ONLY

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

STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	4033 South Yorktown Place
CITY-ST-ZIP	Tulsa, OK 74105
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	600005503856--0
CITY-ST-ZIP	-05/10/02--01032--005 ****490.90 ****490.90
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	

CR2E003 (9/01)

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*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

4-5-02 918-749-6875
Date Daytime Phone #