

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000000355

FILED
Apr 28, 2004
Secretary of State

Entity Name: FLORIDA DISTRIBUTION CORPORATION OF OKLAHOMA

Current Principal Place of Business:

11471 INTERCHANGE CIRCLE SOUTH
MIRAMAR, FL 33025

New Principal Place of Business:

Current Mailing Address:

11471 INTERCHANGE CIRCLE SOUTH
MIRAMAR, FL 33025

New Mailing Address:

FEI Number: 73-1637313

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REYCRAFT, JOEL
11471 INTERCHANGE CIRCLE SOUTH
MIRAMAR, FL 33025

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: CHADWELL, DONALD R
Address: 12712 ST. JOHNS DR.
City-St-Zip: OKLAHOMA CITY, OK 73120

Title: DS () Delete
Name: LOWDER, DENNIS
Address: 5909 NW EXPRESSWAY
City-St-Zip: OKLAHOMA CITY, OK 73132

Title: PV () Delete
Name: REYCRAFT, JOEL
Address: 1550 NW 110TH AVE. IRCLE SOUTH
City-St-Zip: PLANTATION, FL 33322

Title: D () Delete
Name: REYCRAFT, SUSAN
Address: 1550 NW 110TH AVE. IRCLE SOUTH
City-St-Zip: PLANTATION, FL 33322

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DONALD R CHADWELL

CHMN

04/28/2004

Electronic Signature of Signing Officer or Director

Date