

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

FILED
Jan 26 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # F92000000486 (2)

1. Corporation Name
MIDWESTERN PIPELINE SERVICES, INC.



Principal Place of Business
 1901 N 170TH E AVE
 TULSA OK 74116
 US

Mailing Address
 1901 N 170TH E AVE
 TULSA OK 74116
 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
 21 Suite, Apt. #, etc.
 22 City & State
 23 Zip Country
 24

2a. Mailing Address
 25 Suite, Apt. #, etc.
 26 City & State
 27 Zip Country
 28

3. Date incorporated or Qualified
12/04/1992

4. FEI Number
73-1409478

5. Certificate of Status Desired \$8.75 Additional Fees Required

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent
C T CORPORATION SYSTEM
1200 SOUTH 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 **FL** 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 _____ (NOTE: Registered Agent signature required when resigning) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> DELETE
NAME	HARRISON, MICHAEL T	
STREET ADDRESS	1901 N 170TH E AVE	
CITY-ST-ZIP	TULSA OK	
TITLE	V	<input type="checkbox"/> DELETE
NAME	POYAS, JOHN L	
STREET ADDRESS	1901 N 170TH E AVE	
CITY-ST-ZIP	TULSA OK	
TITLE	C	<input checked="" type="checkbox"/> DELETE
NAME	CARLSON, RONALD E	
STREET ADDRESS	1901 N 170TH E AVE	
CITY-ST-ZIP	TULSA OK	
TITLE	V	<input type="checkbox"/> DELETE
NAME	MCNEW, RUSSELL E.	
STREET ADDRESS	1901 N 170TH E AVE	
CITY-ST-ZIP	TULSA OK	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	WILHITE, MICHAEL T.	
1.3 STREET ADDRESS	1901 N. 170TH E. AVE.	
1.4 CITY-ST-ZIP	TULSA, OK 74116	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.1 TITLE	P	
2.2 NAME	HARRISON, T. MICHAEL	
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
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)(f), 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.

SIGNATURE: _____ SIGNATURE REQUIRED 1/8/98

CR2E034 (10/97)