

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000001050

**FILED**  
**Apr 13, 2012**  
**Secretary of State**

**Entity Name:** CONTAINMENT SOLUTIONS SERVICES, INC.

**Current Principal Place of Business:**

6705 E. 81ST STREET  
SUITE 195  
TULSA, OK 74133

**New Principal Place of Business:**

7134 S. YALE  
SUITE 560  
TULSA, OK 74136 US

**Current Mailing Address:**

6705 E. 81ST STREET  
SUITE 195  
TULSA, OK 74133

**New Mailing Address:**

7134 S. YALE  
SUITE 560  
TULSA, OK 74136 US

**FEI Number:** 76-0550912

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND RD  
PLANTATION, FL 33324 US

**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

**OFFICERS AND DIRECTORS:**

Title: PCEO  
Name: BENNETT, ROBERT B PCEO  
Address: 7134 S. YALE, SUITE 560  
City-St-Zip: TULSA, OK 74136 US

Title: SECD  
Name: CAMPBELL, CATHY L SECD  
Address: 7134 S. YALE, SUITE 560  
City-St-Zip: TULSA, OK 74136 US

Title: VPD  
Name: FINDLEY, R. CLAY VPD  
Address: 7134 S. YALE, SUITE 560  
City-St-Zip: TULSA, OK 74136 US

Title: TCFO  
Name: MAYNARD, TIMOTHY D TCFO  
Address: 7134 S. YALE, SUITE 560  
City-St-Zip: TULSA, OK 74136 US

I hereby 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 all other like empowered.

SIGNATURE: DARETH JEFFERS

POA

04/13/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date