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FILED

Apr 28 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # 231384

(9)

1. Corporation Name

FISHHAWK RANCH, INC.

Principal Place of Business

ONE WILLIAMS CENTER  
P.O. BOX 2400  
TULSA OK 74102

Mailing Address

ONE WILLIAMS CENTER  
P.O. BOX 2400  
TULSA OK 74102-2400

3. Date Incorporated or Qualified

12/23/1959

3a. Date of Last Report

05/01/1996

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

4. FEI Number

59-6060550

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

☐ Yes ☒ No

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM  
1200 S. 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

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

(NOTE: Registered Agent's signature required when reinstating)

DATE

12.

OFFICERS AND DIRECTORS

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

VOTA  
BAILEY, KEITH E.  
1 WILLIAMS CENTER  
TULSA OK

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

PD  
BUMGARNER, J. C., JR.  
1 WILLIAMS CENTER  
TULSA, OK 0

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

VASA  
LEWIS, J. FURMAN  
1 WILLIAMS CENTER  
TULSA OK

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

AS  
POTTS, B. E.  
1 WILLIAMS CENTER  
TULSA, OK 00000

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

S  
HIGBEE, D.M.  
1 WILLIAMS CENTER  
TULSA, OK 0

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ DELETE

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

VASAT  
VON GLAHN, WILLIAM G.  
1 WILLIAMS CENTER  
TULSA, OK 74172

D  
MCCARTHY, JACK D.  
1 WILLIAMS CENTER  
TULSA, OK 74172

☐ Change ☒ Addition

☐ Change ☒ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

14. I do 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 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) on an attachment with an address.

SIGNATURE

WILLIAM G. VON GLAHN  
1 WILLIAMS CENTER  
TULSA, OK 74172

CR2E034 (9/96)