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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

PHILLIPS COMMUNICATIONS INC

(2)

FILED May 18 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						
1250 ADAMS BLDG 1250 ADAMS BLDG						
BARTLESVILLE OK 74004		BARTESVILLE OK 74004				
US		US			DO NOT WRITE IN THIS :	SPACE
1					3. Date Incorporated or Qualified	
					07/29/1964	
<u> </u>	Place of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26		73-0738885	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc			5. Certificate of Status Desired	\$8.75 Additional
22 27					G. Germonie of Statos Desired	Fee Required
City & State		City & State			6. Election Campaign Financing	\$5.00 May Be
23		28	1		Trust Fund Contribution	Added to Fees
Zip	Country	Zip ∵n	Countr	У	8. This corporation owes or has paid the cur	
24	25	29	30			_YesNo
1 48	9. Name and Address of Current		81	Monte	10. Name and Address of New Registered	Agent
UNITED STATES CORPORATION COMPANY			81	Name		
	01 HAYS STREET		82	Street	Street Address (P.O. Box Number is Not Acceptable)	
	ITE 105					
IA	LL ah assee FL 32301		83	'		
			84	City	FL	85 Zip Code
11. Pursuant	to the provisions of Sections 607 0502	and 607 1508 Horida Statu	tor the abov	io pamod	corporation submits this statement for the number of	abanaisa ita sas atasad
l office or a	registered agent, or both, in the State of militar with, and accept the obligation	at Horida, Such channo was	authorized b	u the core	poration's board of directors. I hereby accept the app	ointment as registered
	ин а лниаг with, але ассерт the орцуа	1005 01, 5000001 607.0505, F	iorida Statuje	!S .		
SIGNATURE	Signature, typed or printed name of registered ingen-	Land title if applicable (NO	If flegistered Ap	ent signature	required when reinstating) DATE	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12
TITLE	P	DELETE	1.1 TIRE			XXChange
NAME	Re Heis, G. M.		1.2 NAME			****
STREET ADDRESS	426-B INFORMATION CTR		1.3 STREE	T ADDRESS	415-A Information Center	•
CITY-ST-ZIP	B ARTLESVILLE OK		1.4 CITY-	ST-ZIP		
TITLE	V D	XX DELETE	2 1 TITLE	<u></u>	VP/D	Change XX Addition
NAME	HAWKINS, J. H.		22 NAME		Williams, R. S.	-
STREET ADDRESS	415 INFORMATION CENTER		2 3 STHEE	1 ADDRESS	615-B Information Center	•
CITY-ST-ZI₽	Bartlesville ok		2. 4 CITY-	S1-ZIP	Bartlesville, OK 74004	
TITLE	8	DELETE	3.1 T(TLE			☐ Change ☐ Addition
NAME	CONE, D L		3.2 NAME			
STREET ADDRESS	1250 ADAMS BLDG			I ADDRESS		
CITY-ST-ZIP	BARTLESVILLE, OK 0		3.4 CITY-			
TITLE	VD	DELETE	4.1 TITLE	<u> </u>		Change XX Addition
NAME	LUMMIS, R.W.	-	4 2 NAME	}		- Action a season control (1)
STREET ADDRESS	400 W. FRANK PHILLIPS			ADDRESS	627 Information Center	
CITY-ST-ZIP	BARTLESVILLE, OK 0		4.3 SINCE	I	Bartlesville, OK 74004	
TITLE	VD	DELETE	51 INLE	31 - ¢1F	1 1 1 1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Change XX Addition
NAME	DONNELL, T. B	b	52 NAME			Smarge attach noutiful
STREET ADDRESS	373 INFORMATION CENTER		5.3 STREET	Annecce	690 Information Center	,
CITY-ST-ZIP	BARTLESVILLE, OK 0				Bartlesville, OK 74004	1
TITLE	Same of the same o	DELETE	5.4 CITY-1	or-AP	Dartiesville, OK /4004	Change Addition
NAME	CARRIG, JOHN A	- Detert	1			□ Auguige □ Naturigii
	3 A4 PHILLIPS BLDG		6.2 NAME	ADDRESS		
STREET ADDRESS	BARTLESVILLE, OK 0			ADDRESS		
CITY-ST-ZIP	BARTILLOTILLE, UN U		6.4 CITY - S	:1-7IP		

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 annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 13 if changed, or on an attachment with an address.