FILED 2001 UNIFORM BUSINESS REPORT (UBR) Jul 05, 2001 8:00 am DOCUMENT # **Secretary of State** 07-05-2001 90009 035 \*\*\*550.00 Williams Express, INC Principal Place of Business Mailing Address A0075566 2. Principal Place of Business ONE Williams Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 41-3 City & State 4. FEI Number Applied For 1287220 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 4172 Fee Required usA6. Name and Address of Current Registered Agent 7.-Name and Address of New Registered Agent CT CORPORATION System
1200 South Pine ISLAND Street Address (P.O. Box Number is Not Acceptable) PLANTATION, F/ 33324 Zip Code 8. 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent eignature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. Keith E. BAiley ONE Williams Ch mn e TITLE Delete NAME NAME STREET ADDRESS STREET ADDRESS TULSA. OK DYITZ CITY-ST-ZIP CITY-ST-ZIP D. COB. CED TITLE ☐ Delete TITLE RAIPH A. Hill ONE WILLIAMS Ct. ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS LSA OK 74172 CITY-ST-ZIP CITY-ST-ZIP TITLE Deleta - Change - - Addition Steven J. MAlcolm ONE Williams Ct. NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP WLSA. OK 74172 MLE TITLE Delete ☐ Change Addition IKE R. Mefford NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change **Addition** uzanne H. Costini Ne Williams Ct NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP クチィフス TITLE Delete TITLE Change ☐ Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filling does not qualify 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered. ostin 6/25/0/ 918-573.422 SIGNATURE: GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DI

Attachment D#843236 AUNESIA

## WILLIAMS EXPRESS, INC. (Continued)

T Paul W. Nelson One Williams Center Tulsa, OK 74172

AS Kristen E. Cook One Williams Center Tulsa, OK 74172

AT
James-G. Ivey
One Williams Center
Tulsa, OK 74172

AT Mark W. Husband One Williams Center Tulsa, OK 74172

AS Barbara J. Mangrum One Williams Center Tulsa, OK 74172