


2000 UNIFORM BUSINESS REPORT (UBR)

| | | | |
|---|--|--|--|
| DOCUMENT # A07158 | | | |
| 1. Entity Name WJA REALTY LIMITED PARTNERSHIP | | | |
| Principal Place of Business 15 E. 5TH ST., STE 4030 TULSA OK 74103 | | Mailing Address 15 E. 5TH ST., STE 4030 P.O. Box 1439 TULSA OK 74103-4317 74101-1439 | |
| 2. Principal Place of Business | | 3. Mailing Address | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | |
| City & State | | City & State | |
| Zip | | Zip | |
| Country | | Country | |

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

| | | | |
|---|--|---|--|
| 4. FEI Number 04-2632298 | | Applied For <input type="checkbox"/> Not Applicable | |
| 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required | | | |
| 6. Name and Address of Current Registered Agent DONOVAN, RICHARD P 14535 N.W. 60TH AVE. HIALEAH FL 33014-2808 | | 7. Name and Address of New Registered Agent | |
| | | Name | |
| | | Street Address (P.O. Box Number is Not Acceptable) | |
| | | City | |
| | | FL 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 _____ DATE _____
(NOTE: Registered Agent signature required when reinstating)

| | | |
|---|--|--|
| 9. Capital Contributions as Shown on record. \$9,900,000.00 | 10. Amount of Capital Contributions in FLORIDA to date. 9,900,000.00 | 11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION |
|---|--|--|

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

| 12. GENERAL PARTNER INFORMATION | | 13. ADDRESS CHANGES ONLY | |
|---------------------------------|----------------------|--------------------------|------------------------|
| DOCUMENT # | NAME | STREET ADDRESS | |
| NAME | WHEELER, ROGER M JR. | STREET ADDRESS | 5809 Carryback Lane |
| STREET ADDRESS | 3420 E. 64TH ST. | CITY - ST - ZIP | Austin, TX 78746 |
| CITY - ST - ZIP | TULSA OK | STREET ADDRESS | clp wheeler Energy Co. |
| DOCUMENT # | F93000000466 | STREET ADDRESS | P.O. Box 1439 |
| NAME | E.H.P. CORPORATION | CITY - ST - ZIP | Tulsa, OK 74101-1439 |
| STREET ADDRESS | 150 FEDERAL STREET | | |
| CITY - ST - ZIP | BOSTON MA | | |
| DOCUMENT # | | STREET ADDRESS | |
| NAME | | CITY - ST - ZIP | |
| STREET ADDRESS | | | |
| CITY - ST - ZIP | | | |
| DOCUMENT # | | STREET ADDRESS | |
| NAME | | CITY - ST - ZIP | |
| STREET ADDRESS | | | |
| CITY - ST - ZIP | | | |
| DOCUMENT # | | STREET ADDRESS | |
| NAME | | CITY - ST - ZIP | |
| STREET ADDRESS | | | |
| 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)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

| | | | |
|---|---------------------------|------------|-----------------|
| SIGNATURE:  | SIGNATURE REQUIRED | 04/07/2000 | (918) 587-7474 |
| SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER | | Date | Daytime Phone # |