
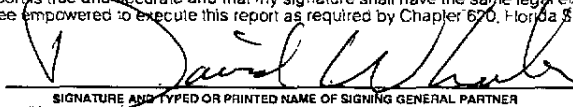


2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

FILED
Mar 15, 2004 08:00 AM
Secretary of State

DOCUMENT # A07158 1. Entity Name WJA REALTY LIMITED PARTNERSHIP					
Principal Place of Business 4033 SOUTH YORKTOWN PLACE TULSA, OK 74105			Mailing Address 4033 SOUTH YORKTOWN PLACE TULSA, OK 74105		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	01132004 Chg-LP CR2E003 (10/03)	
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 CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525			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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ DATE _____ <small>Signature: typed or printed name of registered agent and title if applicable.</small>					
9. Capital Contributions as Shown on record. \$9,900,000.00		10. Amount of Capital Contributions in FLORIDA to date.			
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 CITY-ST-ZIP	WHEELER, DAVID B 5809 CARRYBACK LANE AUSTIN, TX		STREET ADDRESS CITY-ST-ZIP		
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	F93000000466 E.H.P. CORPORATION 4033 SOUTH YORKTOWN PLACE TULSA, OK 74105		STREET ADDRESS CITY-ST-ZIP	U000000095696 03/24/04-80045-002 526.25	
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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: 			Date 3-10-04		Daytime Phone # 918-749-6875
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER DAVID B. Wheeler					



STAPLE CHECK HERE