· · · Vile	H					
2001 PLEASE	READ ALL INS	TRUCTIONS BEF	ORE CO	MPLETING THIS FO	RM.	
LIMITED PARTNERSHIP		A E PAR MEAT CE tatle irr ars sorety of arte VISION OF CORPORATIONS	35	52 or NO	FILED	
DOCUMENT# 1. Name of Limited Partnership Williams ENERGY PARTNERSLAP.				01 NOV -7 AM 8:55 SEGRETARY OF STATE TAULAHASSEE, FLORIDA		
9/28/01				-11/27/0101045004 ****141.25 ****141.25		
2. Principal Office Address ONE WILLIAMS	Otr ON	Office Address	th	Date Formed or Registered To Do Business in Florida	116/2000	
Suitė, Apt. #, etc.	Suite, Apt. i	#, etc.	1	. FEI Number 73-1599053	Applied For Not Applicable	
City & State Tulsa OK 76	1172 Jul	SA OK	6.	CERTIFICATE OF STATUS DESIRED	for a Certificate of Status	
Zip Country USA	741	72 USA		a. Capital Contributions as shown or \$1,000.00		
8. Name and Address of Current Registered Agent				Amount of Capital Contributions in	PLORIDA to date.	
Name CT CORPONATION System Street Address (P.O. Box Number is Not Agrephable) 1200 South Vine I. Slava RD. Suite, Apt. #, Etc.				FEES: 1.) Filing Fee(s): Computed at a rate of \$7 per \$1,000 on amount entered in 7b, with a minimum filing fee of \$52.50 and a maximum of \$437.50, for each year due this office. 2.) Supplemental Fee(s): \$88.75 for each year due this office, beginning with 1992 calendar year. 3.) Penalty Fee(s): \$500 penalty fee for each year report form is delinquent.		
PLANTATION		State Zip Co FL 33.32	ode 4	Note: If the amount entered in 7b is g 7a, a supplemental affidavit must be and appropriate filing fee.		
9. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, 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 its general partner(s). I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes. CONNET BRYAN SIGNATURE (Registered Agent Accepting Appointment) Connet Bryan SPECIAL ASSISTANT SECRETY DATE 11-7-01						
SIGNATURE (Registered Agent Accepting App					1, , , , , , , , , , , , , , , , , , ,	
A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.						
10. Name(s) of General Partner(s)	(Do I	Address of Each General Partner NOT Use Post Office Box Numbers)		City, State and Zip Code	10a. Registration Document Number	
Williams GP, L		e Williams Ct		SA. OX 94/72 0000046 	MUUUUWO2349 349608 101045-005	
Avin 11 ad 112				####*TDQ	.00 4 D .400.00	
AN 52.50 THIS IS THE 2001 UNIFORM BUSINESS REPORT FORM.						
ARSUPN 88.75					<i>f</i>	
541.25			<u> </u>			
Note: General partners MAY Not be changed on this form; an amendment must be filed to change a general partner. 11. Ido hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(1), Florida Statules. I release the Division of						
11. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(i) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by changer 620, Florida Statutes.						
SIGNATURE						
Typed or Printed Name of General Partner Signing Form SuzANNe H. Costin Telephone Number 918.573.4221						