2006 FOR PROFIT CORPORATION

FILED May 01, 2006 08:00 AM

| 8. Name and Address of Current Registered Agent ELLY, PETER J 345 ENTERPRISE STREET COCEE, FL 34761 B. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and the obligations of registered agent. SIGNATURE FILE NOWITH FEE IS \$150.00 After May 1, 2006 Fee with be \$550.00 10. OFFICERS AND DIRECTORS 10. OFFICERS AND D | ANNUAL REPORT | | | Secretary of State | | | |
|--|---|---------------------------|-------|-----------------------------------|------------------------|----------------------------------|--|
| 2627 EAST 21ST STREET, STE. 200 TRUSA, OK 74114 DO NOT WRITE IN THIS SPACE 04072008 No Crig-P CRZE034 (11/05) | 1. Entity Name | | | | | | |
| DO NOT WRITE IN THIS SPACE A. FEI Number 73-1535280 Not Applied 73 | 2627 EAST 21ST STREET, STE, 200 20 | 627 EAST 21ST STREET, STE | . 200 | 1 (887)/10 8 (86 | | | |
| KELLY, PETER J 345 ENTERPRISE STREET OCOEE, FL 34761 E. 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 the obligations of registered agent. SIGNATURE Signature, good or printed name of registered agent and the illepticable (NOTE flegatine) Agent signature requires when reinstancy) DATE FILE NOWITH FEE IS \$150.00 After May 1, 2006 Fee will be \$5550.00 Trust Fund Contribution. 10. OFFICERS AND DIRECTORS Time COLLINS, ROGER B SIMET ADDRESS 1626 EAST 287H STREET GITY-ST-20P TULSA, OK 74114 TIME DP NAME DRIGGERS, J. MICHAEL SIMET ADDRESS 4825 LARIAT TRAIL DITY-ST-20P NORTH RICHLAND HILLS, TX 76180 TIME DS NAME ALLEN, ANTHONY D SIMES ADDRESS 5612 EAST 105TH PLACE GITY-ST-2P TULSA, OK 74137 DO NOT WRITE | DO NOT WRITE IN | N THIS SPA | CE | 04072008 4. FEI Numb 73-153 | No Chg-P er 5280 | CR2E034 (| 11/05) Applied For Not Applicate 75 Additional |
| the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if epiticable (NOTE Registered Agent signature required when remarkating) PILE NOWITH FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 10. OFFICERS AND DIRECTORS 11712 COLLINS, ROGER B SITIET ADDRESS GITT-ST-ZIP TULSA, OK 74114 11712 DP NAME CRITICADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS ALLEN, ANTHONY D STREET ADDRESS 5512 EAST 108TH PLACE CTY-ST-ZIP TULSA, OK 74137 DO NOT WRITE | KELLY, PETER J 345 ENTERPRISE STREET | | | , | - | | |
| After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees D5/12/06-80055-(102-150). Trust Fund Contribution. D5/12/06-80055-(102-150). Trust Fund Contribution. D5/12/06-80055-(102-150). Trust Fund Contribution. D5/12/06-80055-(102-150). Trust Fund Contribution. | SIGNATURE | | | | | | |
| TITLE C NAME COLLINS, ROGER B STREET ADDRESS CITY-ST-ZIP TULSA, OK 74137 TITLE DS STREET ADDRESS CITY-ST-ZIP TULSA, OK 74137 TULSA, OK 74137 COLLINS, ROGER B STREET ADDRESS CITY-ST-ZIP TULSA, OK 74114 DP NAME DRIGGERS, J. MICHAEL 4825 LARIAT TRAIL NORTH RICHLAND HILLS, TX 76180 DS NAME ALLEN, ANTHONY D STREET ADDRESS CITY-ST-ZIP TULSA, OK 74137 DO NOT WRITE | | | | | U0000 05/12/06 | 000548176 06-80055-002 150.00 | |
| IN THIS SPACE STREET ADDRESS | TITLE OAMS STREET ADDRESS GITY-ST-ZIP TULSA, OK 74114 TITLE DP DRIGGERS, J. MICHAEL STREET ADDRESS GITY-ST-ZIP NORTH RICHLAND HILLS, TX 76180 TITLE NORTH RICHLAND HILLS, TX 76180 STREET ADDRESS GITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP TULSA, OK 74137 HTLE NAME | | | | | | |

12. I hereby certify that the Information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. (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 asth; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 807, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _

TITLE NAME STREET ADDRESS CITY-ST-717 TITLE NAME STREET ADDRESS

> SIGNATURE AND TIPED OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR ANTHOM DIALLEN

4/25/66 918743-2993 Daylora Phone #