

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 15, 2007 8:00 am
Secretary of State

05-15-2007 90008 050 ***150.00

DOCUMENT # F06000002143

1. Entity Name
ORYX CRUDE T&T, INC.



Principal Place of Business
**123 ROBERT S. KERR AVENUE
OKLAHOMA CITY, OK 73102**

Mailing Address
**123 ROBERT S. KERR AVENUE
OKLAHOMA CITY, OK 73102**

2. Principal Place of Business - No P.O. Box #
1201 Lake Robbins Dr.
Suite, Apt. #, etc.

3. Mailing Address
P.O. Box 1330
Suite, Apt. #, etc.



04232007 Chg-P CR2E034 (12/06)

City & State
The Woodlands, TX
Zip
77380
Country
USA

City & State
Houston, TX
Zip
77010
Country
USA

4. FEI Number
23-2350487
Applied For
☐ Not Applicable
5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324**

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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HAGER, DAVID A 123 ROBERT S. KERR AVENUE OKLAHOMA CITY, OK 73102	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD HOLLEK, DARRELL E 16666 NORTHCHASE HOUSTON, TX 77060	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HOUSER, ANDREW C 16666 NORTHCHASE HOUSTON, TX 77060	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S PILCHAR, GREGORY E 123 ROBERT S. KERR AVENUE OKLAHOMA CITY, OK 73102	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T POOS, CHRISTINA M 123 ROBERT S. KERR AVENUE OKLAHOMA CITY, OK 73102	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Kurz, Karl F. 1201 Lake Robbins Dr. The Woodlands, TX 77380	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD Daniels, Robert P. 1201 Lake Robbins Dr. The Woodlands, TX 77380	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Buehner, Ronald D. 1201 Lake Robbins Dr. The Woodlands, TX 77380	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Reeves, Robert K. 1201 Lake Robbins Dr. The Woodlands, TX 77380	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Tonnesen, R. W. 1201 Lake Robbins Dr. The Woodlands, TX 77380	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Ronald D. Buehner **Ronald D. Buehner** 4/26/07 832-636-7883
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #