

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED
May 19 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F69375 (6)
1. Corporation Name
TRANSOL MARICOPA, INC.



Principal Place of Business: 2200 NORTH CLASSEN, STE. 1350 OKLAHOMA CITY OK 73106
Mailing Address: 2200 NORTH CLASSEN, STE. 1350 OKLAHOMA CITY OK 73106-5810

3. Date Incorporated or Qualified: 03/03/1982
3a. Date of Last Report: 05/15/1996
4. FEI Number: 59-2344399
Applied For: Not Applicable
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

2. Principal Place of Business: 21 Suite, Apt. #, etc.: 22 City & State: 23 Zip: 24 Country: 25
2a. Mailing Address: 26 Suite, Apt. #, etc.: 27 City & State: 28 Zip: 29 Country: 30

9. Name and Address of Current Registered Agent

LANE, CHARLES
100 S. ASHLEY DR., STE. 1700
TAMPA FL 33602

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City: FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation 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 the corporation's board of directors. I hereby accept the appointment as registered agent I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

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

12. OFFICERS AND DIRECTORS

12.1 TITLE: P MELISSE, CHRIS 2200 NORTH CLASSEN, STE. 1350 OKLAHOMA CITY OK
12.2 TITLE: D KAMPER, CARL 2200 N. CLASSEN, STE. 1350 OKLAHOMA CITY OK
12.3 TITLE: D RABENORT, JAN 2200 N. CLASSEN, STE. 1350 OKLAHOMA CITY OK

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 TITLE: 13.2 NAME: 13.3 STREET ADDRESS: 13.4 CITY-ST-ZIP:
13.5 TITLE: 13.6 NAME: 13.7 STREET ADDRESS: 13.8 CITY-ST-ZIP:
13.9 TITLE: 13.10 NAME: 13.11 STREET ADDRESS: 13.12 CITY-ST-ZIP:
13.13 TITLE: 13.14 NAME: 13.15 STREET ADDRESS: 13.16 CITY-ST-ZIP:
13.17 TITLE: 13.18 NAME: 13.19 STREET ADDRESS: 13.20 CITY-ST-ZIP:

14. I do 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 annual report or supplemental annual 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 12 or Block 13, changed, or on an attachment with an address.

SIGNATURE: J. Rabenort SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

May 5, 1997 180-460300
Date Daytime Phone #

CR2E034 (9/96)