

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 04, 1999 8:00 am
Secretary of State

05-04-1999 90128 016 ***150.00

DOCUMENT # F93000002168

1. Corporation Name
SAXON PUBLISHERS, INC.

Principal Place of Business

2450 JOHN SAXON BLVD
NORMAN OK 73071
US

Mailing Address

2450 JOHN SAXON BLVD
NORMAN OK 73071
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/10/1993

4. FEI Number

73-1129741

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 owes the current year Intangible
Personal Property Tax.

☒ Yes ☐ No

9. Name and Address of Current Registered Agent

STANLEY, BERBERT
1125 N ELLIS RD
P O BOX 6578
JACKSONVILLE FL 32236

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 agent applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4-13-99

OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

12. TITLE ☐ DELETE

P
NAME WANG, FRANK
STREET ADDRESS 1320 W. LINDSEY
CITY-ST-ZIP NORMAN OK

TITLE ☐ DELETE

VPTS
NAME GASAWAY, JILL
STREET ADDRESS 1320 W LINDSEY
CITY-ST-ZIP NORMAN OK 73069

TITLE ☐ DELETE

D
NAME SAXON, SELBY
STREET ADDRESS 1320 W. LINDSEY
CITY-ST-ZIP NORMAN OK 73069

TITLE ☐ DELETE

D
NAME SAXON, BRUCE
STREET ADDRESS 1320 W. LINDSEY
CITY-ST-ZIP NORMAN OK 73069

TITLE ☐ DELETE

D
NAME JEWELL, KIRK
STREET ADDRESS 1320 W. LINDSEY
CITY-ST-ZIP NORMAN OK 73069

TITLE ☐ DELETE

VP
NAME SCHILLING, FREDERICK
STREET ADDRESS 1320 W LINDSEY
CITY-ST-ZIP NORMAN OK 73069

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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 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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-13-99 (405) 329-7071

CR2E034 (11/98)