

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # F93000003399 (3)

1. Corporation Name

WILLIAMS MARKETING GROUP INTERNATIONAL, INC.



Principal Place of Business

Mailing Address

2005 RAHL DRIVE
GUTHRIE OK 73044

2005 RAHL DRIVE
GUTHRIE OK 73044

3. Date Incorporated or Qualified
07/26/1993

3a. Date of Last Report
04/20/1995

2. Principal Place of Business

2a. Mailing Address

21 2005 Ruhl Drive
Suite, Apt. #, etc.

26 P.O. Box 340
Suite, Apt. #, etc.

4. FEI Number

84-1202295

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WILLIAMS, THOMAS E
5400 HWY. 98 EAST
SUITE 200
DESTIN FL 32541

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 obligation of, Section 607.1503, Florida Statutes.

SIGNATURE

Thomas E Williams

Thomas E Williams

1/19/96

(NOTE: Registered Agent signature required when re-appointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	CPT	<input type="checkbox"/> DELETE
NAME	WILLIAMS, THOMAS E	
STREET ADDRESS	5400 HWY. 98 EAST, SUITE 200	
CITY-ST-ZIP	DESTIN FL 32541	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	DAVIS, DANIEL	
STREET ADDRESS	2005 RUHL DRIVE	
CITY-ST-ZIP	GUTHRIE OK 73044	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	DAVIS, CARLA	
STREET ADDRESS	2005 RUHL DRIVE	
CITY-ST-ZIP	GUTHRIE OK 73044	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied in this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 as an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daniel L. Davis
Daniel L. Davis

1/19/96 405/282-8770

DATE DAYTIME PHONE #

CR2E034 (12/95)