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May 01 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 # F93000005378 (5)

1. Corporation Name
VYVX, INC.

Principal Place of Business
ONE WILLIAMS CENTER
TULSA OK 74172

Mailing Address
P.O. BOX ~~2400~~ 22067 Tax Dept
TULSA OK ~~74102-2400~~ 74121



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified		3a. Date of Last Report	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		11/24/1993		05/01/1996	
22 City & State		27 City & State		4. FEI Number		Applied For	
23 Zip		28 Zip		73-1349451		Not Applicable	
24 Country		29 Country		5. Certificate of Status Desired		8.75 Additional Fee Required	
25		30		6. Election Campaign Financing		5.00 May Be Added to Fees	
				Trust Fund Contribution		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	
						Yes No	

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

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

TITLE	D	DELETE
NAME	JAMES R. HERBSTER	
STREET ADDRESS	ONE WILLIAM CENTER	
CITY - ST - ZIP	TULSA OK 74172	
TITLE	PD	DELETE
NAME	BOTHOF, DELWIN L	
STREET ADDRESS	ONE WILLIAMS CENTER	
CITY - ST - ZIP	TULSA OK 74172	
TITLE	D	DELETE
NAME	HIRSCH, HENRY C	
STREET ADDRESS	ONE WILLIAMS CENTER	
CITY - ST - ZIP	TULSA OK 74172	
TITLE	S	DELETE
NAME	DAVID HIEBEE	
STREET ADDRESS	ONE WILLIAM CENTER	
CITY - ST - ZIP	TULSA OK 74172	
TITLE	VO	DELETE
NAME	S. MILLER WILLIAMS	
STREET ADDRESS	ONE WILLIAM CENTER	
CITY - ST - ZIP	TULSA OK 74172	
TITLE	COBD	DELETE
NAME	HOWARD E. JANTEN	
STREET ADDRESS	ONE WILLIAM CENTER	
CITY - ST - ZIP	TULSA OK 74172	

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	David M. Higbee	
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 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 if applicable, or on an attachment with an address.

SIGNATURE:

SIGNATURE REQUIRED

David M. Higbee

4/22/97

918-588-4490