

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **F94000001920 (7)**

1. Corporation Name

SAMSON INDUSTRIAL CORPORATION-SOUTHEAST

Principal Place of Business

**SAMSON PLAZA
TWO WEST SECOND ST.
TULSA OK 74103**

Mailing Address

**SAMSON PLAZA
TWO WEST SECOND ST.
TULSA OK 74103**



2. Principal Place of Business

2a. Mailing Address

21. State, Apt. #, etc.

26. State, Apt. #, etc.

22. City & State

27. City & State

23. Zip Country

28. Zip Country

24. Zip

25. Country

29. Zip

30. Country

9. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324**

3. Date Incorporated or Qualified
04/13/1994

3a. Date of Last Report
04/11/1995

4. FEI Number
73-1442021

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. 193.032
Florida Statutes ☒ Yes ☐ No

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 607.1506, 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. Hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0506, Florida Statutes.

SIGNATURE

Signature of Officer or Director

Signature of Registered Agent

Date

12. OFFICERS AND DIRECTORS

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1. TITLE	1. TITLE ☐ Change ☐ Addition
2. NAME	2. NAME
3. STREET ADDRESS	3. STREET ADDRESS
4. CITY, ST, ZIP	4. CITY, ST, ZIP
5. TITLE	5. TITLE ☐ Change ☐ Addition
6. NAME	6. NAME
7. STREET ADDRESS	7. STREET ADDRESS
8. CITY, ST, ZIP	8. CITY, ST, ZIP
9. TITLE	9. TITLE ☐ Change ☐ Addition
10. NAME	10. NAME
11. STREET ADDRESS	11. STREET ADDRESS
12. CITY, ST, ZIP	12. CITY, ST, ZIP
13. TITLE	13. TITLE ☐ Change ☐ Addition
14. NAME	14. NAME
15. STREET ADDRESS	15. STREET ADDRESS
16. CITY, ST, ZIP	16. CITY, ST, ZIP
17. TITLE	17. TITLE ☒ Change ☐ Addition
18. NAME	18. NAME
19. STREET ADDRESS	19. STREET ADDRESS
20. CITY, ST, ZIP	20. CITY, ST, ZIP

**CP
CHALKER, GLENN A
TWO WEST SECOND ST.
TULSA OK 74103**

**DV
SCHUSTERMAN, STACY
TWO WEST SECOND ST.
TULSA OK 74103**

**D
THOLEN, C. PHILIP
TWO WEST SECOND ST
TULSA OK 74103**

**S
JONES, ANNABEL M
TWO WEST SECOND ST
TULSA OK 74103**

**VT
HAIR, DON
TWO WEST SECOND ST
TULSA OK 74103**

**S
CANON, JACK A
TWO WEST SECOND ST
TULSA OK**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE ☐ Change ☐ Addition
2. NAME
3. STREET ADDRESS
4. CITY, ST, ZIP
5. TITLE ☐ Change ☐ Addition
6. NAME
7. STREET ADDRESS
8. CITY, ST, ZIP
9. TITLE ☐ Change ☐ Addition
10. NAME
11. STREET ADDRESS
12. CITY, ST, ZIP
13. TITLE ☐ Change ☐ Addition
14. NAME
15. STREET ADDRESS
16. CITY, ST, ZIP
17. TITLE ☒ Change ☐ Addition
18. NAME
19. STREET ADDRESS
20. CITY, ST, ZIP

14. I do hereby certify that the information supplied with 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 included 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 or Block 14 or on an attached list with an address.

SIGNATURE: *Don Hair*

Don Hair Senior Vice-President
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01-26-96

918-583-1791

CR2E034 (12/95)