

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 19, 2003 8:00 am
Secretary of State

05-19-2003 90214 048 ***150.00

DOCUMENT # F94000004236

1. Entity Name

ACCORD HUMAN RESOURCES, INC.



DO NOT WRITE IN THIS SPACE

90136702

2. Principal Place of Business

210 PARK AVENUE

Suite, Apt. #, etc.

SUITE 1200

3. Mailing Address

210 PARK AVENUE

Suite, Apt. #, etc.

SUITE 1200

DO NOT WRITE IN THIS SPACE

City & State

OKLAHOMA CITY, OK

City & State

OKLAHOMA CITY, OK

4. FEI Number

73-1402191

Applied For

Not Applicable

Zip

73102

Country

US

Zip

73102

Country

US

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

**9. Election Campaign Financing
Trust Fund Contribution.** ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP**

D- TUCKER, CRAIG M
210 PARK AVENUE, SUITE 1200
OKLAHOMA CITY, OK 73102

**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP**

**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP**

PD- HAGEMAN, DALE L
210 PARK AVENUE, SUITE 1200
OKLAHOMA CITY, OK 73102

**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP**

**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP**

D- EDWARDS, CARL E JR
210 PARK AVENUE, SUITE 1200
OKLAHOMA CITY, OK 73102

**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP**

**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP**

D- PRICE, FORD C JR
210 PARK AVENUE, SUITE 1200
OKLAHOMA CITY, OK 73102

**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP**

**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP**

STD- FIEDLER, JAMES J
210 PARK AVENUE, SUITE 1200
OKLAHOMA CITY, OK 73102

**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP**

**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP**

D- EDWARDS, EDWARD B
210 PARK AVENUE, SUITE 1200
OKLAHOMA CITY, OK 73102

**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP**

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:

Sherr Blaik

SHERRI BLAIK

05/16/03

(405) 232-9888

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/02)