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

PROFIT CORPORATION ANNUAL REPORT **1996**

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

DOCUMENT # F94000004463

1. Corporation Name

OPUBCO Enterprises, Inc.

| Principal Place of Business | Mailing Address |
|---|---|
| 10111 N. Central Expressway<br>Dallas, TX 75231 | 10111 N. Central Expressway<br>Dallas, TX 75231 |

3. Date Incorporated or Qualified: 4/28/94
3a. Date of Last Report: 1995

2. Principal Place of Business — 21 — Suite, Apt. #, etc. 22 — City & State 23 — Zip 24 — Country 25

2a. Mailing Address — 26 — Suite, Apt. #, etc. 27 — City & State 28 — Zip 29 — Country 30

4. FEI Number: 56-1568318 ☐ 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 [X] No

**9. Name and Address of Current Registered Agent**

CT Corporation
1200 South Pine Island Road
Plantation, Florida 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 ________ DATE ________

**12. OFFICERS AND DIRECTORS**

| | |
|---|---|
| TITLE | Director, President ☐ DELETE |
| NAME | Edward L. Gaylord |
| STREET ADDRESS | 9000 N. Broadway |
| CITY-ST-ZIP | Oklahoma City, OK 73114 |
| TITLE | Director, Vice-President ☐ DELETE |
| NAME | E. K. Gaylord II |
| STREET ADDRESS | 9000 N. Broadway |
| CITY-ST-ZIP | Oklahoma City, OK 73114 |
| TITLE | Director, Vice-President ☐ DELETE |
| NAME | Glenn M. Stinchcomb |
| STREET ADDRESS | 10111 N. Central Expressway |
| CITY-ST-ZIP | Dallas, TX 75231 |
| TITLE | Treasurer & Asst. Secretary ☐ DELETE |
| NAME | David C. Story |
| STREET ADDRESS | 9000 N. Broadway |
| CITY-ST-ZIP | Oklahoma City, OK 73114 |
| TITLE | Secretary ☐ DELETE |
| NAME | Christine Gaylord Everest |
| STREET ADDRESS | 9000 N. Broadway |
| CITY-ST-ZIP | Oklahoma City, OK 73114 |
| TITLE | ☐ DELETE |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |

**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

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***225.00

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

~~AEB~~
5-16-96

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 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.

**SIGNATURE:** David C. Story, Treasurer 5/6/96
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

David C. Story

CR2E034 (12/95)