


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

FILED
Apr 26, 2005 8:00 am
Secretary of State

04-26-2005 90169 004 ***150.00

| | |
|--|---|
| DOCUMENT # <u>F98000000018</u> |  |
| 1. Entity Name <u>VINTAGE PETROLEUM, INC.</u> | |

DO NOT WRITE IN THIS SPACE

| | | | |
|---|-----------------------|---|-----------------------|
| 2. Principal Place of Business <u>110 W. SEVENTH STREET</u> Suite, Apt. #, etc. | | 3. Mailing Address <u>110 W. SEVENTH STREET</u> Suite, Apt. #, etc. | |
| City & State <u>TULSA, OK</u> | | City & State <u>TULSA, OK</u> | |
| Zip <u>74119</u> | Country <u>USA</u> | Zip <u>74119</u> | Country <u>USA</u> |

DO NOT WRITE IN THIS SPACE

| | | |
|---|--|--|
| 4. FEI Number <u>73-1182669</u> | | Applied For <input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required | | |

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|---------------------------------------|--|-----------------------------|
| DO NOT WRITE IN THIS SPACE | 7. Name and Address of Current Registered Agent | |
| | Name <u>CT CORPORATION SYSTEM</u> | |
| | Street Address (P.O. Box Number is Not Acceptable) <u>1200 SOUTH PINE ISLAND ROAD</u> | |
| | City <u>PLANTATION</u> | Zip Code <u>FL 33324</u> |

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 _____ (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. <input type="checkbox"/> \$5.00 May Be Added to Fees |
|--|--|

| 10. OFFICERS AND DIRECTORS | | | |
|--|---|--|---------------------------------------|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <u>PD</u> <u>STEPHENSON, CHARLES C., JR</u> <u>110 WEST SEVENTH STREET</u> <u>TULSA, OK 74119</u> | TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <u>VD</u> <u>ABERNATHY, WILLIAM C.</u> <u>110 WEST SEVENTH STREET</u> <u>TULSA, OK 74119</u> | TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <u>DVTS</u> <u>BARNES, WILLIAM C.</u> <u>110 WEST SEVENTH STREET</u> <u>TULSA, OK 74119</u> | TITLE NAME STREET ADDRESS CITY-ST-ZIP | DO NOT WRITE IN THIS SPACE |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <u>D</u> <u>LAWRENCE, BRIAN H.</u> <u>110 WEST SEVENTH STREET</u> <u>TULSA, OK 74119</u> | TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <u>VP, ASST</u> <u>MEIMERSDORF, MICHAEL F.</u> <u>110 WEST SEVENTH STREET</u> <u>TULSA, OK 74119</u> | TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <u>D</u> <u>MENABBE, JOHN T. II</u> <u>110 WEST SEVENTH STREET</u> <u>TULSA, OK 74119</u> | TITLE NAME STREET ADDRESS CITY-ST-ZIP | |

12. I 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 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:

Michael F. Meimersdorf MICHAEL F. MEIMERSDORF

4/13/05

918-592-0101

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/02)