2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # F99000004207 May 15, 2000 8:00 am Secretary of State 1. Entity Name GPHLINCOLN, INC. 05-15-2000 90095 003 ***150.00 Principal Place of Business Mailing Address SAMSON PLAZA SAMSON PLAZA TWO WEST 2ND STREET TWO WEST 2ND STREET TULSA OK 74103-3123 **TULSA OK 74103** o o i o o o 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc City & State Applied For City & State 4. FEI Number applied for 94-3337412 Not Applicable Zip Country \$8.75 Additional Country Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 Zip Code City 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. SIGNATURE (NOTE. Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. DATE 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Pavable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. ☐ Addition ☐ Delete TITLE ☐ Change TITLE NAME DARDICK, MICHAEL NAME STREET ADDRESS STREET ADDRESS **4099 MCWEN, SUITE 370** CITY-ST-ZIE CITY-ST-ZIP DALLAS TX 75244 Change ■ Addition TITLE ٧D ☐ Delete TITLE PHILLIPS, DREW S NAME STREET ADDRESS STREET ADDRESS 2 WEST 2ND STREET CITY-ST-ZIF CITY-ST-ZIP **TULSA OK 74103** Change Addition ☐ Delete TITLE TITLE JONES, ANNABEL M NAME STREET ADDRESS STREET ADDRESS 2 WEST 2ND STREET CITY-ST-7IP CITY-ST-ZIP **TULSA OK 74103** Delete CF0 TITLE Change ■ Addition TITLE **DUNN, TIM** NAME NAME STREET ADDRESS STREET ADDRESS 4099 MCEWEN, SUITE 370 CITY-ST-ZIP CJTY-ST-ZIP DALLAS TX 75244 ☐ Change ☐ Addition ☐ Delete TITLE TITLE SCHUSTERMAN, STACY HAME NAME STREET ADDRESS STREET ADDRESS 2 WEST 2ND STREET CITY-ST-ZIP CITY-ST-ZIP **TULSA OK 74103** ☐ Change ☐ Addition D ☐ Delete TITLE TITLE HALL, PATRICK M NAME NAME

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 11 or Block 12 if changed, or on an attachment with er like empowered

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

2 WEST 2ND STREET

TULSA OK 74103

STREET ADDRESS

Drew Phillips, Vice President

918-583-1791