

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 06, 2004 08:00 AM
Secretary of State

DOCUMENT # F99000004207

1. Entity Name
GPI-LINCOLN, INC.



Principal Place of Business

SAMSON PLAZA
TWO WEST 2ND STREET
TULSA, OK 74103

Mailing Address

SAMSON PLAZA
TWO WEST 2ND STREET
TULSA, OK 74103

DO NOT WRITE IN THIS SPACE



01062004 No Chg-P. CR2E034 (10/03)

4. FEI Number
94-3337412

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

**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 reissuing)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

U000000104788
04/06/04-80025-017 150.00

10. OFFICERS AND DIRECTORS

TITLE P
NAME DARDICK, MICHAEL
STREET ADDRESS TWO WEST SECOND STREET
CITY-ST-ZIP TULSA, OK 74103

TITLE VD
NAME PHILLIPS, DREW S
STREET ADDRESS 2 WEST 2ND STREET
CITY-ST-ZIP TULSA, OK 74103

TITLE S
NAME JONES, ANNABEL M
STREET ADDRESS 2 WEST 2ND STREET
CITY-ST-ZIP TULSA, OK 74103

TITLE CFO
NAME DUNN, TIM
STREET ADDRESS TWO WEST SECOND STREET
CITY-ST-ZIP TULSA, OK 74103

TITLE CD
NAME SCHUSTERMAN, STACY
STREET ADDRESS 2 WEST 2ND STREET
CITY-ST-ZIP TULSA, OK 74103

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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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)(l), 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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Drew S. Phillips
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-31-04

918-583-1791

Date

Daytime Phone #