

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# M02000001946

FILED  
Feb 14, 2003  
Secretary of State

**Entity Name:** WILLIAMS MIDSTREAM MARKETING AND RISK MANAGEMENT, LLC

**Current Principal Place of Business:**

ONE WILLIAMS CENTER  
TULSA, OK 74172

**New Principal Place of Business:**

**Current Mailing Address:**

ONE WILLIAMS CENTER  
TULSA, OK 74172

**New Mailing Address:**

**FEI Number:** 04-3678352

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

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

**Name and Address of New Registered Agent:**

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:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: D ( ) Delete  
Name: ARMSTRONG, ALAN S  
Address: ONE WILLIAMS CENTER  
City-St-Zip: TULSA, OK 74172

Title: D (X) Delete  
Name: MALCOLM, STEVEN J  
Address: ONE WILLIAMS CENTER  
City-St-Zip: TULSA, OK 74172

Title: D (X) Delete  
Name: WRIGHT, PHILLIP D  
Address: ONE WILLIAMS CENTER  
City-St-Zip: TULSA, OK 74172

Title: PCEO (X) Delete  
Name: WRIGHT, PHILLIP D  
Address: ONE WILLIAMS CENTER  
City-St-Zip: TULSA, OK 74172

Title: VP (X) Delete  
Name: PAYNE, LARRY C  
Address: ONE WILLIAMS CENTER  
City-St-Zip: TULSA, OK 74172

Title: CT (X) Delete  
Name: BITTICK, MARY JANE  
Address: ONE WILLIAMS CENTER  
City-St-Zip: TULSA, OK 74172

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: WILLIAMS ENERGY SERV, ICES, LLC  
Address: ONE WILLIAMS CENTER  
City-St-Zip: TULSA, OK 74172

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: BRIAN K. SHORE

S

02/14/2003

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date