2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 13, 2003 8:00 am
Secretary of State
03-13-2003 90002 046 ****50.00

DOCUMENT # M96000000086

1. Entity Name
BSW CONSTRUCTION SERVICES, L.L.C.

Principal Place of Business	Mailing Address
ONE WEST THIRD STREET. SUITE 100 SUITE 100 TULSA OK 74103-3505	ONE WEST THIRD STREET. SUITE 100 SUITE 100 TULSA OK 74103-3505

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business		3. Mailing Address	
One W. Third St.		One West Third St.	
Suite, Apt. #, etc.: Suite 800		Suite, Apt. #, etc.: Suite 800	
City & State: Tulsa		City & State: Tulsa	
Zip: 74103-3520	Country: US	Zip: 74103-3520	Country: US

4. FEI Number 73-1485401 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
% CT CORPORATION SYSTEM
660 E. JEFFERSON ST
TALLAHASSEE FL 32301

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

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 reinstating) DATE

FILE NOW!!! FEE IS $50.00
Make Check Payable to Florida Department of State
Due By May 1, 2003

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR	☒ Delete
NAME	~~PATTON JR, FRANK R~~	
STREET ADDRESS	~~ONE WEST THIRD ST., SUITE 100~~	
CITY-ST-ZIP	~~TULSA OK 74103-3505~~	
TITLE	MGR	☐ Delete
NAME	STEPHENS, JEFFREY L	
STREET ADDRESS	ONE WEST THIRD ST., SUITE 100	
CITY-ST-ZIP	TULSA OK 74103-3505	
TITLE		☐ Delete
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10. ADDITIONS/CHANGES

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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CITY-ST-ZIP		

CR2E083 (10/02)

11. 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 is true and accurate and that my 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: SIGNATURE REQUIRED (President) 3/6/03 918-582-8771

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #