FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION annual report



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

| | 1997 | CO NI | <i>9</i> / | DIVISION OF C | OHPOF | (A)IC |)NS | | | | | |
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| | | P06963 G CORPORATIO | | (3) | | | | | | | | |
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| Principal Place | of Business | | Ma | ling Address | | | | | g oddinody old dolla dokie ibild birde foly | DIDIN BIDIN DI | IST BIBN BIBN | 81 9 11 1881 |
| 3232 WEST RENO LEGAL DEPARTM | | | | | ENT | | | | | | | |
| OKLAHOMA CIT US | . BOX 26750 Ahoma City OK 7312 | DX 2073U OMA CITY OK 73126-0750 | | | | | | | | | | |
| | | | | US | | | | | 3. Date Incorporated or Qualified | 3a. Da | te of Last R | eport |
| | | | | | | | 08/01/1985 | 04/2 | 4/1996 | | | |
| | ace of Business | | | Mailing Address | | | | İ | 4. FEI Number | | | plied For |
| 21 305 N Suite, Apt | . MacArth #.elc. | ur | 26 | Suite, Apt. #, etc. | | | ····· | | 73-1249942 | | \$8.75 | t Applicable |
| 22 Suite | | | 27 | | | | | 1 | 5. Certificate of Status Desired | | Fee Re | |
| City & State | | | | City & State | | | | | 6. Election Campaign Financing | | \$5.00 | May Be |
| | oma City, | | 28 | | 1 - 2- | | | | Trust Fund Contribution | | Added | to Fees |
| Zp | L | Country | · · · · · · | Zip | | untry | | | 8. This corporation has liability for | intangible] Yes [] | | . 199.032, |
| 24 73127 | 25 Name and | Address of Curren | 29 t Regist | ared Agent | 30 | | | | Florida Statutes 10. Name and Address of New Re | | | |
| | CORPORATION | | · · · · · · · · · · · · · · · · · · · | | | 81 | Name | | ig, trains and readings of flow the | 9-0101007 | -90.11 | |
| | | | | | | | 01 | -1 -1 | (60 6-11-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1- | | | |
| 1200 S. PINE ISLAND ROAD PLANTATION FL 33324 | | | | | | 82 Street Addre | | | s (P.O. Box Number is Not Acceptat | эө) | | |
| | | | | | | В3 | | | | | | |
| | | | | | | 84 | City | | | | 85 Zip | Code |
| | | | | | | | | | | FL | 1 ' | |
| 11. Pursuant I | to the provisions egistered agent. | of Sections 607.050; or both, in the State | 2 and 60 of Florid | 7.1508, Florida Statut a. Such change was a | es, the a authorize | above ed by | e-named corpo | orpore | ation submits this statement for the pair is board of directors. I hereby accept | ourpose of ot the app | changing it sintment as | s registered registered |
| agent. La | m familiar with, a | rid accept the obliga | tions of | Section 607.0505, Flo | orida Sta | tutes | 5. | | • | | | |
| SIGNATURE | Signature, typed of po- | nied name of registered age | nt and titin i | applicable INOT | E: Register | ed Ane | ot signature re | equired | when reinstating) | DATE | | |
| 12. | | OFFICERS AND | | | 13. | | | | ADDITIONS/CHANGES TO OFFIC | | DIRECTOR | S IN 12 |
| TITLE | PD | | | ☐ DELETE | 1.7 | ITLE | | | | | Change | Addition |
| NAME | RECORDS, G | | | | a de la | VAME | | | | | | |
| STREET ADDRESS | | RSTATE 44 RD., 61 | TH FL | | 1.33 | STREET | ADDRESS | | | | | |
| CITY-ST-ZIP | OKLAHOMA | CITY OK | | DELETE | | CITY-S | 1-2IP | | | | Change | Addition |
| THILE | EIGH MADK | A | | F" DEFEIG | 1 | VAME | | | | | CT CHAILDS | ריי אמטינוטו) |
| NAME STREET ADDRESS | FISH, MARK | a Istate 44 Rd., 61 | IH EI | | 1 | | ADDRESS | | | | | |
| CITY-ST-ZIP | OKLAHOMA | | | | | | ST-ZIP | | | | | |
| THILE | SDSV | | | DELETE | | ITLE | | | ······································ | | Change | Addition |
| NAME: | RODGERS, E | ETTY L. | | | 3.2 | NAME | | | | | | i |
| STREET ADDRESS | | ISTATE 44 RD 6TI | H FL | | 3.3 | STREET | ADDRESS | | | | | |
| CITY - S1 - ZIP | OKLAHOMA | CITY OK | | | | | ST-ZIP | | · · · · · · · · · · · · · · · · · · · | ······································ | T 5. | 1 1 1 2 2 2 2 |
| TITLE | T | NDD 4 | | DELETE | 4 | IITLE | - | | | | Change | Addition |
| NAME PAREST LEGISSON | DOBSON, TO |)DD A ISTATE 44 RD., 6' | nu ei | | | NAME | ADDDESS | | | | | |
| STREET ADORESS | OKLAHOMA | • | וח ורנ | | | SIKEET City-s | ADDRESS | | | | | ļ |
| CITY-ST-ZIP TITLE | D | OILL OK | | DELETE | | TITLE | 11-517 | ******* | | | Change | ☐ Addition |
| NAM: | RECORDS, G | SEORGE J | | _ | - 8 | NAME | 1 | | | | - | ı |
| STREET ADDRESS | | RSTATE 44 RD 6T | H FL | | | | ADDRESS | | | | | |
| CHTY - S1 - 7)P | OKLAHOMA | | | | 5.4 | OTY-S | T-ZIP | | | | | |
| TITLE | ٧ | | | DELETE | 6.1 | TITLE | | | | | Change | Addition |
| NAME | BUSH, KARE | | | | | SMAN | ļ | | | | | |
| STREET ADORESS | 3232 WEST | | | | 1 | | ADDRESS | | | | | |
| CHTY-ST-ZIP | OKLAHOMA | CHY UK | | | 6.4 | CITY - S | T-ZIP | | | | | |

14. Too 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 annual report or supplemental annual 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 12 or Block 13

SIGNATURE:

Vice President

4/15/97

(405)840-7600

FILED

Apr 29 1997 8:00am

Secretary of State

Daytime Prione #

MIDNATION FUNDING CORPORATION P06963 (3)

PRINCIPAL OFFICERS

V (Vice President)
HARRIS, LINDA W.
3232 WEST RENO
OKLAHOMA CITY OK 73107

AVP (Assistant Vice President) MCLEAN, MATT C. 305 N. MacArthur, Suite 307 OKLAHOMA CITY OK 73127

AT (Assistant Treasurer)
MARTIN, STEPHEN G.
501 WEST INTERSTATE 44 RD 6TH FL
OKLAHOMA CITY OK 73118-6054