

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P09699 (0)

1. Corporation Name

UNIVERSAL ASSOCIATES OF OKLAHOMA, INC.



Principal Place of Business

P.O. BOX 35666  
TULSA OK 74153

Mailing Address

P.O. BOX 35666  
TULSA OK 74153

3. Date Incorporated or Qualified  
04/10/1986

3a. Date of Last Report  
05/01/1995

4. FEI Number  
73-0758949

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc

26 Suite, Apt. #, etc

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION FL 33324

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent

(PRINT) Registered Agent's name and corporate office, if existing

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☐ DELETE  
NAME HATCHER, WILEY  
STREET ADDRESS 1811 BERING, STE. #400  
CITY-ST-ZIP HOUSTON TX

11 TITLE ☐ Change ☐ Addition  
12 NAME  
13 STREET ADDRESS  
14 CITY-ST-ZIP

TITLE VD ☐ DELETE  
NAME BENSON, R.T.  
STREET ADDRESS 11430 SOUTH WINSTON  
CITY-ST-ZIP TULSA OK

21 TITLE ☐ Change ☐ Addition  
22 NAME  
23 STREET ADDRESS  
24 CITY-ST-ZIP

TITLE VTD ☐ DELETE  
NAME LAND, GENE A.  
STREET ADDRESS 2979 EAST 56TH PLACE  
CITY-ST-ZIP TULSA OK

31 TITLE ☐ Change ☐ Addition  
32 NAME  
33 STREET ADDRESS  
34 CITY-ST-ZIP

TITLE S ☐ DELETE  
NAME STUCKY, DIANA W.  
STREET ADDRESS 8521 S 68TH E. AVE.  
CITY-ST-ZIP TULSA OK

41 TITLE ☐ Change ☐ Addition  
42 NAME  
43 STREET ADDRESS  
44 CITY-ST-ZIP

TITLE V ☒ DELETE  
NAME PORTER, W.H.  
STREET ADDRESS 8110 S. JAMESTOWN AVE.  
CITY-ST-ZIP TULSA OK

51 TITLE ☐ Change ☐ Addition  
52 NAME  
53 STREET ADDRESS  
54 CITY-ST-ZIP

TITLE VD ☐ DELETE  
NAME BOWERS, JOHN R.  
STREET ADDRESS 5521 SOUTH 68TH EAST AVE  
CITY-ST-ZIP TULSA OK

61 TITLE ☐ Change ☐ Addition  
62 NAME  
63 STREET ADDRESS  
64 CITY-ST-ZIP

Please Remove, DECEASED

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 if changed, or on an attachment with an address.

SIGNATURE:

*R. J. Benson*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Exec Vice-President

4/9/96  
DATE

918/628-1620  
Telephone Number

CR2E034 (12/95)