

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

FILED
May 01 1996 8:00 am
Secretary of State

DOCUMENT # P19518 (0)

1. Corporation Name

WILLIAMS ACQUISITION HOLDING COMPANY, INC.



Principal Place of Business

Mailing Address

ONE WILLIAMS CENTER
P O BOX 2400 48-6
TULSA OK 74102
US

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P O BOX 2400 48-6
TULSA OK 74102
US

3. Date Incorporated or Qualified
06/03/1988

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

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

12-1633269

Applied For
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

City & State

City & State

23

28

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

24

25

Country

29

30

Country

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

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 and officer if applicable

(NOTE: Registered Agent signature required when not statutory)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

PD
NAME BUMGARNER, J.C., JR.
STREET ADDRESS ONE WILLIAM CENTER
CITY-ST-ZIP TULSA OK

TITLE ☐ DELETE

VT
NAME BAILEY, K.E.
STREET ADDRESS ONE WILLIAM CENTER
CITY-ST-ZIP TULSA OK

TITLE ☐ DELETE

ASO
NAME BAILEY, K.E.
STREET ADDRESS ONE WILLIAM CENTER
CITY-ST-ZIP TULSA OK

TITLE ☐ DELETE

VSTD
NAME MCCARTHY, JACK D.
STREET ADDRESS ONE WILLIAM CENTER
CITY-ST-ZIP TULSA OK

TITLE ☐ DELETE

VAST
NAME LEWIS, J. FURMAN
STREET ADDRESS ONE WILLIAMS CENTER
CITY-ST-ZIP TULSA OK

TITLE ☐ DELETE

S
NAME HIGBEE, DAVID M.
STREET ADDRESS ONE WILLIAM CENTER
CITY-ST-ZIP TULSA OK

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Bobby E. Potts

4/30/96

(918)588-4210

CR2E034 (12/95)