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

PROFIT CORPORATION ANNUAL REPORT

**19**98

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P19518

(0)

WILLIAMS ACQUISITION HOLDING COMPANY, INC. Principal Place of Business Mailing Address ONE WILLIAMS CENTER ONE WILLIAMS CENTER P O BOX 2400 48-6 P O BOX 2400 48-6 **TULSA OK 74102 TULSA OK 74102** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/03/1988 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 12-1633269 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 25 Yes 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent CT CORPORATION SYSTEM 81 Name 1200 S. PINE ISLAND ROAD **B2** Street Address (P.O. Box Number is Not Acceptable) PLANTATION FL 33324 83 84 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 little if applicable (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELET**E** 1.1 TITLE Change Addition BUMGARNER, J.C., JR. NAME 1.2 NAME **ONE WILLIAM CENTER** STREET ADDRESS 1.3 STREET ADDRESS **TULSA OK** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE 2.1 TITLE Change Addition BAILEY, K.E. NAME **2.2 NAME ONE WILLIAM CENTER** STREET ADDRESS 2.3 STREET ADDRESS TULSA OK CITY-ST-ZIP 2.4 CITY-ST-ZIP शाप DELETE TITLE 3.1 TITLE Change Addition MCCARTHY, JACK D. NAME 3.2 NAME **ONE WILLIAM CENTER** STREET ADDRESS 3.3 STREET ADDRESS **TULSA OK** CITY-ST-ZIP 3.4. CITY-ST-ZIP VAST DELETE Change TITLE Addition 4.1 TITLE VON GLAHN, WILLIAM G 4. 2 NAME **ONE WILLIAMS CENTER** STREET ADDRESS 4.3 STREET ADDRESS **TULSA OK** CITY-ST-ZIP 4.4 CITY - ST- ZIP DELETE TITLE Change 5.1 TITLE Addition HIGBEE, DAVID M. NAME 5.2 NAME **ONE WILLIAM CENTER** STREET ADDRESS 5.3 STREET ADDRESS **TULSA OK** CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE TITLE Change Addition 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

14. Thereby certify that the information supplied with the filling 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 eath; that I am an officer or director of the corporation or the receiper 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 in on any transmit with an address.

6.4 CITY-ST-ZIP

Don Milion - 1/-1

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**FILED** 

Apr 22 1998 8:00am

Secretary of State