2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P19518

FILED Apr 12, 2007 Secretary of State

Entity Name: WILLIAMS ACQUISITION HOLDING COMPANY, INC.

	Principal Place	of Business:	New Principal Place	of Business:
	LIAMS CENTEI K 74102 US	_		
Current Mailing Address:			New Mailing Addres	s:
NE WILL	LIAMS CENTEI	₹		
0-5		_		
ULSA, O	K 74172 U	3		
El Number	: 80-0049908	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
ame and	d Address of C	Current Registered Agent:	Name and Address	of New Registered Agent:
200 S. PI	PORATION SYS INE ISLAND RO ION, FL 33324	DAD		
	e named entity : e of Florida.	submits this statement for th	e purpose of changing its registere	ed office or registered agent, or both,
IGNATU	RE:			
	Electror	nic Signature of Registered A	Agent	Date
ection Ca	mpaign Financin	g Trust Fund Contribution ().		
FFICER	S AND DIREC	TORS:	ADDITIONS/CHANG	ES TO OFFICERS AND DIRECTOR
tle:	DC ()) Delete	Title:	() Change () Addition
ame:	MALCOLM, ST		Name:	
ldress:	ONE WILLIAM		Address:	
ty-St-Zip:	TULSA, OK 74	172	City-St-Zip:	
tle:	T ()) Delete	Title:	() Change () Addition
ame:	SAILOR, RODN	1EY J	Name:	
ldress:	ONE WILLIAM	CENTER	Address:	
ty-St-Zip:	TULSA, OK 74	172	City-St-Zip:	
-	V ()) Delete	Title:	() Change () Addition
ile:	JOHNSON, MIC	HAEL P	Name:	
		CENTED	Address:	
ıme:	ONE WILLIAMS	O CENTER		
ıme: dress:	ONE WILLIAMS TULSA, OK 74		City-St-Zip:	
ame: ldress: ty-St-Zip:	TULSA, OK 74	172		() Change () Addition
ame: ldress: ty-St-Zip: :le:	TULSA, OK 74	172) Delete	Title:	() Change () Addition
me: dress: y-St-Zip: le: me:	TULSA, OK 74 S () SHORE, BRIAN	172) Delete I K	Title: Name:	() Change () Addition
me: dress: :y-St-Zip: le: me: dress:	TULSA, OK 74	172) Delete J K S CENTER	Title:	() Change () Addition
ame: ldress: ty-St-Zip: ele: ame: ldress: ty-St-Zip:	TULSA, OK 74 S () SHORE, BRIAN ONE WILLIAMS TULSA, OK 74	172) Delete I K S CENTER 172	Title: Name: Address: City-St-Zip:	.,,
ame: dress: ty-St-Zip: le: ame: ldress: ty-St-Zip:	TULSA, OK 74 S () SHORE, BRIAN ONE WILLIAMS TULSA, OK 74	172) Delete J K S CENTER 172) Delete	Title: Name: Address:	() Change () Addition () Change () Addition
ame: Idress: ty-St-Zip: Ide: Ide: Idress: Idress: ty-St-Zip: Ide: Ide:	TULSA, OK 74 S () SHORE, BRIAN ONE WILLIAMS TULSA, OK 74 AT ()	172) Delete J K S CENTER 172) Delete RK W	Title: Name: Address: City-St-Zip: Title:	
ame: Idress: ty-St-Zip: Idress: Idress: Idress: Idress: Idress: Idress: Idress: Idress:	TULSA, OK 74 S () SHORE, BRIAN ONE WILLIAMS TULSA, OK 74 AT () HUSBAND, MA	172) Delete I K S CENTER 172) Delete RK W CENTER	Title: Name: Address: City-St-Zip: Title: Name:	
ame: Idress: ty-St-Zip: Idress: Idress: Idress: ty-St-Zip: Idress: Idress: Idress: Idress: Idress: Idress:	TULSA, OK 74 S () SHORE, BRIAN ONE WILLIAMS TULSA, OK 74 AT () HUSBAND, MA ONE WILLIAM TULSA, FL 74	172) Delete I K S CENTER 172) Delete RK W CENTER	Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	() Change () Addition
ame: ddress: ty-St-Zip: ddress: ddress: ty-St-Zip: ddress: ty-St-Zip: ddress: ty-St-Zip:	TULSA, OK 74 S () SHORE, BRIAN ONE WILLIAMS TULSA, OK 74 AT () HUSBAND, MAI ONE WILLIAM TULSA, FL 74	172) Delete I K S CENTER 172) Delete RK W CENTER 172) Delete	Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title:	
ame: ddress: ity-St-Zip: tle: ame: ddress: ity-St-Zip: tle: ame: ddress: ity-St-Zip: tte: ame: ddress: ity-St-Zip:	TULSA, OK 74 S () SHORE, BRIAN ONE WILLIAMS TULSA, OK 74 AT () HUSBAND, MA ONE WILLIAM TULSA, FL 74 VP () BENDER, JAMI	172) Delete J K S CENTER 172) Delete RK W CENTER 172) Delete S J	Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name:	() Change () Addition
tle: ame: ddress: ity-St-Zip:	TULSA, OK 74 S () SHORE, BRIAN ONE WILLIAMS TULSA, OK 74 AT () HUSBAND, MAI ONE WILLIAM TULSA, FL 74	172) Delete J K S CENTER 172) Delete RK W CENTER 172) Delete S J S CENTER	Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title:	() Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BRIAN K. SHORE S 04/12/2007