

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P29374

(6)

1. Corporation Name

CONTINENTAL NATURAL GAS, INC.

Principal Place of Business

1412 SOUTH BOSTON
STE. 500
TULSA OK 74119

Mailing Address

1412 SOUTH BOSTON
STE. 500
TULSA OK 74119



2. Principal Place of Business

21 Tulsa, Oklahoma

Suite, Apt. #, etc

22 1412 S Boston, Ste 500

City & State

23 Tulsa, Ok 74119

Zip

74119

Country

25 USA

2a. Mailing Address

26

Suite, Apt. #, etc

27

City & State

28

City & State

29

City & State

30

City & State

3. Date Incorporated or Qualified

05/16/1990

3a. Date of Last Report

06/19/1995

4. FEI Number

73-1198957

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

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH 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 title, if applicable.

(If title is printed, Agent signature is required when reappointing.)

(Date)

12. OFFICERS AND DIRECTORS

TITLE P
NAME ADAMS, GARY C.
STREET ADDRESS 3113 COLUMBIA CIR.
CITY-ST-ZIP TULSA OK

☐ DELETE

TITLE VSD
NAME SMITH, GARRY D.
STREET ADDRESS 11938 S. CANTON
CITY-ST-ZIP TULSA OK

☐ DELETE

TITLE D
NAME ADAMS, GARY C.
STREET ADDRESS 3133 COLUMBIA CIR.
CITY-ST-ZIP TULSA OK

☐ DELETE

TITLE VP
NAME LONGMORE, SCOTT C.
STREET ADDRESS 9461 S. 102 E. AVE
CITY-ST-ZIP TULSA OK

☐ DELETE

TITLE VP
NAME SPENCER, TERRY K.
STREET ADDRESS 5831 E. 63RD ST.
CITY-ST-ZIP TULSA OK

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

☐ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Vice President

6-14-96

(918) 582-4700

CR2E034 (3/96)