, vo. 01742		Annual Report Form 1995			2. Registered Agent and Office NOT A P.O. BOX		
Return to: SECRETARY OF STATE	1. Mailing Address - Pl	Mailing Address - Please Correct, If Not Correct		C T CORE	PORATION TH SIXTH	SYSTEM	
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	WM. D. DIC	L CORPORATION KSON	4	BOISE	ID	- -	
NO FEE REQUIRED	BOX 909			2 0			
** FINAL NOTICE **	AROMORE	0K 734		3. Organized Unde		1742	
. Corporations: Enter Names and I				<i>y</i>	ι ο	1146	
Limited Liability Companies: Ente	er Names and Addresse	es of D Managers or	☐ Members (check one)			
Office held Name	<u>s</u>	treet or P.O. Address		City	State	Zip	
RESIDENT ROBERT KELLEY	P. 0	. BOX 909		ARDMORE	OK	73402	
ECRETARY ORVILLE WALRA	AVEN P. O	. BOX 909		ARDMORE	OK	73402	
IRECTORS ROBERT KELLEY		. BOX 909		ARDMORE	OK	73402	
ORVILLE WALRA	VEN P. O	. BOX 909		ARDMORE	OK	73402	
WM. D. DICKSO)N P. O	BOX 909		ARDMORE	OK	73402	
Signature of New Registered	Agent 6.	ure Wall	1	Date _	10-27-	98	
133UED: 10-03-1	Name	(Typed or WM. D. DIC)	KSON	Title SI	R. V.P. &	TREAS.	
	C DO NO	T TAPE OR S	TAPLE),		1701		
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			My making				