

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000002868

FILED
Jul 08, 2005
Secretary of State

Entity Name: NORTH AMERICAN LUBRICANTS COMPANY

Current Principal Place of Business:

27122 B PASEO ESPADA, STE 1022
SAN JUAN CAPISTRANO, CA 92675

New Principal Place of Business:

27128 A PASEO ESPADA SUITE 1521
SAN JUAN CAPISTRANO, CA 92675

Current Mailing Address:

4511 WILLOW RD, STE 1
PLEASANTON, CA 94588

New Mailing Address:

FEI Number: 94-3049060 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CVPS () Delete
Name: READ, LAWRENCE A
Address: 1979 GREEN VALLEY RD
City-St-Zip: ALAMO, CA 94507

Title: DT () Delete
Name: PASS, CHARLES N
Address: 48 FLORA VISTA PLACE
City-St-Zip: DANVILLE, CA 94526

Title: DP (X) Delete
Name: ROONEY, GARRY
Address: 24646 ROYALE RIDGE
City-St-Zip: LAGUNA NIGEL, CA 92673

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CHARLES PASS

CFO

07/08/2005

_____ Electronic Signature of Signing Officer or Director

_____ Date