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**Feb 06 1997 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # F96000001740 (7)

1. Corporation Name
SCURLOCK PERMIAN CORPORATION



Principal Place of Business
**3 ALLEN CENTER
333 CLAY ST.
HOUSTON TX 77210**

Mailing Address
**PO BOX 4648
HOUSTON TX 77210-4648**

3. Date Incorporated or Qualified
04/08/1996

3a. Date of Last Report

4. FEI Number
75-0908366

Applied For
 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**

6. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

2. Principal Place of Business

21. Suite, Apt. #, etc.

22. City & State

23. Zip Country

24. Zip Country

2a. Mailing Address

26. Suite, Apt. #, etc.

27. City & State

28. City & State

29. Zip Country

30. Zip Country

9. Name and Address of Current Registered Agent

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

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

85. Zip Code
FL

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 fee, if applicable (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE DELETE

NAME **P HILL, LAUREN L**

STREET ADDRESS **333 CLAY ST.**

CITY - ST - ZIP **HOUSTON TX 77210**

TITLE DELETE

NAME **V BRADLEY, JOHN D**

STREET ADDRESS **333 CLAY ST.**

CITY - ST - ZIP **HOUSTON TX 77210**

TITLE DELETE

NAME **V COE, EDWARD D**

STREET ADDRESS **333 CLAY ST.**

CITY - ST - ZIP **HOUSTON TX 77210**

TITLE DELETE

NAME **V DREYFUSS, LAWRENCE J**

STREET ADDRESS **333 CLAY ST.**

CITY - ST - ZIP **HOUSTON TX 77210**

TITLE DELETE

NAME **VD HAUSRATH, DAVID L**

STREET ADDRESS **1000 ASHLAND DR**

CITY - ST - ZIP **RUSSELL KY 77002**

TITLE DELETE

NAME **V LECHLER, C R**

STREET ADDRESS **333 CLAY ST.**

CITY - ST - ZIP **HOUSTON TX 77002**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Change Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE Change Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE Change Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE Change Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE Change Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE Change Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing 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 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE *Charles D. Ellis* **Charles D. Ellis** 1-30-97 606/357-7484
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)