

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Mar 31, 1999 8:00 am  
Secretary of State

03-31-1999 90015 025 \*\*\*150.00

DOCUMENT # P09520

1. Corporation Name  
CHEVRON STATIONS INC.

Principal Place of Business  
575 MARKET ST  
SAN FRANCISCO CA 94105  
US

Mailing Address  
225 BUSH ST  
SAN FRANCISCO CA 94104  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
03/25/1986

4. FEI Number  
84-0618607

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional  
Fee Required

6. Election Campaign Financing ☐ \$5.00 May Be  
Trust Fund Contribution Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

2a. Mailing Address

26 575 Market Street

27 Suite, Apt. #, etc.

Room-2648

28 City & State

San Francisco, CA

29 Zip

94105

Country

30 U.S.

9. Name and Address of Current Registered Agent

THE PRENTICE HALL CORPORATION SYSTEM, INC.  
110 NORTH MAGNOLIA STREET  
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

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.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME PD

STREET ADDRESS ~~ROSEHILL, NEW BARN LANE~~

CITY-ST-ZIP ~~CHELSTENHAM, GLOS GL52 3LA~~

TITLE ☐ DELETE

NAME AS

STREET ADDRESS JONES, J. H JR.

CITY-ST-ZIP 225 BUSH STREET

SAN FRANCISCO CA 94104

TITLE ☐ DELETE

NAME S

STREET ADDRESS ~~KOWAL, S.~~

CITY-ST-ZIP 575 MARKET ST

SAN FRANCISCO CA 94105

TITLE ☐ DELETE

NAME T

STREET ADDRESS SMAY, D.T.

CITY-ST-ZIP 2005 DIAMOND BOULEVARD

CONCORD CA 94520

TITLE ☐ DELETE

NAME AT

STREET ADDRESS ZIARNIK, A.P.

CITY-ST-ZIP 575 MARKET STREET

SAN FRANCISCO CA 94105

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS 6001 BOLLINGER CANYON ROAD

1.4 CITY-ST-ZIP SAN RAMON, CA 94583

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 KOWAL, S.

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☒ Change ☐ Addition

4.2 NAME SMAY, D P

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 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
KATHERINE HARRIS  
MAR 26 1999 415-894-7700  
Date Daytime Phone #

CR2E034 (11/98)