## 2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 817423** 

Entity Name: EXXONMOBIL INTER-AMERICA INC.

**Current Principal Place of Business:** 

3225 GALLOWS ROAD FAIRFAX. VA 22037-0001

**Current Mailing Address:** 

3225 GALLOWS ROAD

FAIRFAX. VA 22037-0001 US

FEI Number: 13-6044290 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

3225 GALLOWS ROAD

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301 US

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

FILED May 01, 2014

**Secretary of State** 

CC0936528439

Date

Officer/Director Detail:

Title PD Title D, VP

Name RHODES, JOHN R Name JAMES, JIMMIE E

Address C/O EXXONMOBIL INTER-AMERICA Address C/O EXXONMOBIL INTER-AMERICA

3225 GALLOWS ROAD 3225 GALLOWS ROAD

City-State-Zip: FAIRFAX VA 22037-0001 City-State-Zip: FAIRFAX VA 22037-0001

Title DIRECTOR, VP, TREASURER Title D, VP

Name BARLOW, SCOTT D Name VEGA, LUIS ENRIQUE

Address C/O EXXONMOBIL INTER-AMERICA Address C/O EXXONMOBIL INTER-AMERICA

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3225 GALLOWS ROAD 3225 GALLOWS ROAD

City-State-Zip: FAIRFAX VA 22037-0001 City-State-Zip: FAIRFAX VA 22037-0001

Title S Title ASST. SECRETARY

Name GAVRON, CATHERINE J Name WEBB, JOEL

Address C/O EXXONMOBIL INTER-AMERICA Address C/O EXXONMOBIL INTER-AMERICA

INC 3225 GALLOWS ROAD

City-State-Zip: FAIRFAX VA 22037-0001 City-State-Zip: FAIRFAX VA 22037-0001

I hereby 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 all other like empowered.

SIGNATURE: JOEL WEBB ASST. SECRETARY 05/01/2014