

2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 829096

Entity Name: EXXON MOBIL CORPORATION**Current Principal Place of Business:**5959 LAS COLINAS BLVD.
IRVING, TX 75039**Current Mailing Address:**5959 LAS COLINAS BLVD.
IRVING, TX 75039 US**FEI Number: 13-5409005****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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**Officer/Director Detail :**

Title PD
Name TILLERSON, REX W
Address C/O 5959 LAS COLINAS BLVD.
City-State-Zip: IRVING TX 75039

Title S
Name ROSENTHAL, DAVID S
Address C/O 5959 LAS COLINAS BLVD.
City-State-Zip: IRVING TX 75039

Title D
Name BURNS, URSULA M
Address C/O 5959 LAS COLINAS BLVD.
City-State-Zip: IRVING TX 75039

Title D
Name BRABECK-LETMATHE, PETER
Address C/O 5959 LAS COLINAS BLVD.
City-State-Zip: IRVING TX 75039

Title T
Name SCHLECKSER, ROBERT N
Address C/O 5959 LAS COLINAS BLVD.
City-State-Zip: IRVING TX 75039

Title D
Name BOSKIN, MICHAEL J
Address C/O 5959 LAS COLINAS BLVD.
City-State-Zip: IRVING TX 75039

Title D
Name FORE, HENRIETTA H
Address C/O 5959 LAS COLINAS BLVD.
City-State-Zip: IRVING TX 75039

Title D
Name PALMISANO, SAMUEL J
Address C/O 5959 LAS COLINAS BLVD.
City-State-Zip: IRVING TX 75039

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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**AUTHORIZED PERSON****04/29/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

Title D
Name REINEMUND, STEVEN S
Address C/O 5959 LAS COLINAS BLVD.
City-State-Zip: IRVING TX 75039

Title D
Name FAULKNER, LARRY R
Address C/O 5959 LAS COLINAS BLVD.
City-State-Zip: IRVING TX 75039

Title D
Name FRAZIER, KENNETH
Address C/O 5959 LAS COLINAS BLVD.
City-State-Zip: IRVING TX 75039

Title ASST. SECRETARY
Name WEBB, JOEL
Address C/O 5959 LAS COLINAS BLVD.
City-State-Zip: IRVING TX 75039

Title D
Name FISHMAN, JAY S
Address C/O 5959 LAS COLINAS BLVD.
City-State-Zip: IRVING TX 75039

Title D
Name WHITACRE, EDWARD E
Address C/O 5959 LAS COLINAS BLVD.
City-State-Zip: IRVING TX 75039

Title D
Name GEORGE, WILLIAM
Address C/O 5959 LAS COLINAS BLVD.
City-State-Zip: IRVING TX 75039