

**2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F07000003224

**Entity Name:** WESTERN OILFIELDS SUPPLY COMPANY**Current Principal Place of Business:**3404 STATE ROAD  
BAKERSFIELD, CA 93308**Current Mailing Address:**PO BOX 2248  
BAKERSFIELD, CA 93303**FEI Number:** 95-1362750**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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 PCEO  
Name LAKE, JOHN W  
Address 3404 STATE ROAD  
City-State-Zip: BAKERSFIELD CA 93308

Title VPT  
Name LAKE, ROBERT  
Address 3404 STATE ROAD  
City-State-Zip: BAKERSFIELD CA 93308

Title CFO  
Name LAKE, ROBERT  
Address 3404 STATE ROAD  
City-State-Zip: BAKERSFIELD CA 93308

Title VP  
Name LAKE, WALTER G  
Address 3404 STATE ROAD  
City-State-Zip: BAKERSFIELD CA 93308

Title VP  
Name LAKE, CYNTHIA  
Address 3404 STATE ROAD  
City-State-Zip: BAKERSFIELD CA 93308

Title S  
Name PULLEY, MARGUERITE K  
Address 3404 STATE ROAD  
City-State-Zip: BAKERSFIELD CA 93308

Title ASST CORP SECRETARY  
Name SCHOEN, ANTHONY E  
Address 3404 STATE ROAD  
City-State-Zip: BAKERSFIELD CA 93308

*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: ANTHONY E SCHOEN****ASST CORP SECRETARY 03/20/2013**

Electronic Signature of Signing Officer/Director Detail

Date