2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P34317

Entity Name: MOBIL EXPLORATION & PRODUCING U.S. INC.

FILED
Apr 17, 2021
Secretary of State
0285278551CC

Current Principal Place of Business:

22777 SPRINGWOODS VILLAGE PARKWAY

SPRING, TX 77389

Current Mailing Address:

22777 SPRINGWOODS VILLAGE PARKWAY SPRING, TX 77389 US

FEI Number: 75-2162766 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

THE PRENTICE-HALL CORPORATION SYSTEM INC. 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

Officer/Director Detail:

 Title
 DIRECTOR, VP
 Title
 DIRECTOR, VP

 Name
 ASH, KATHLEEN D
 Name
 SCOTT, DAVID R

Address 22777 SPRINGWOODS VILLAGE Address 22777 SPRINGWOODS VILLAGE

PARKWAY PARKWAY

City-State-Zip: SPRING TX 77389 City-State-Zip: SPRING TX 77389

Title DIRECTOR, PRESIDENT Title DIRECTOR, VP
Name UNDERWOOD, JAMES (KEITH) Name WALZ, GARY S

Address 22777 SPRINGWOODS VILLAGE Address 22777 SPRINGWOODS VILLAGE

PARKWAY PARKWAY

City-State-Zip: SPRING TX 77389 City-State-Zip: SPRING TX 77389

Title VP Title SECRETARY

Name BRINKLEY, TIMOTHY J Name GLAZE, MONICA D

Address 22777 SPRINGWOODS VILLAGE Address 22777 SPRINGWOODS VILLAGE

PARKWAY PARKWAY

City-State-Zip: SPRING TX 77389 City-State-Zip: SPRING TX 77389

TitleTREASURERTitleCONTROLLERNameBURCHFIEL, MICHELLE LNameOTTE, KURT J

Address 22777 SPRINGWOODS VILLAGE Address 22777 SPRINGWOODS VILLAGE

PARKWAY PARKWAY

City-State-Zip: SPRING TX 77389 City-State-Zip: SPRING TX 77389

Continues on page 2

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: JASON P SIMON ASST SECRETARY 04/17/2021

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title ASST. SECRETARY
Name SIMON, JASON P

Address 22777 SPRINGWOODS VILLAGE PARKWAY

City-State-Zip: SPRING TX 77389