#### **2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P34317

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

FILED
Jan 15, 2020
Secretary of State
5397829286CC

## **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:

City-State-Zip:

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title DIRECTOR, VP Title DIRECTOR, VP

Name GRIFFIN, ANDREE Name MULLINS, CARMAN H

Address 22777 SPRINGWOODS VILLAGE Address 22777 SPRINGWOODS VILLAGE

PARKWAY PARKWAY

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

Title DIRECTOR, PRESIDENT Title DIRECTOR, VP

Name SCOTT, T. GLENN Name WESLEY, BRYAN W

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 ROLLAND, JAROD M 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: LORI GUGLIELMINI ASST SECRETARY 01/15/2020

Electronic Signature of Signing Officer/Director Detail

Date

# Officer/Director Detail Continued:

Title ASST. SECRETARY
Name GUGLIELMINI, LORI

Address 22777 SPRINGWOODS VILLAGE PARKWAY

City-State-Zip: SPRING TX 77389