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PROFIT CORPORATION ANNUAL REPORT
1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **266676** **(6)**

1. Corporation Name
FARMERS UNION OIL AND ROYALTY COMPANY

Principal Place of Business	Mailing Address
3186 E JAMES LEE BLVD CRESTVIEW FL 32539 US	3186 E JAMES LEE BLVD CRESTVIEW FL 32539-6034 US

3. Date Incorporated or Qualified: 01/30/1963
3a. Date of Last Report: 04/09/1996

2. Principal Place of Business	2a. Mailing Address
21 3186 E. James Lee Blvd.	26 3186 E. James Lee Blvd.
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 Crestview, Florida	City & State 28 Crestview, Florida
Zip / Country 24 32539 / 25 USA	Zip / Country 29 32539 / 30 USA

4. FEI Number: 59-1083119 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent
HOWARD, MARY JANE
3186 E JAMES LEE BLVD
CRESTVIEW FL 32539

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SHOFFNER, ROY, COL. 406 DOSTER ST. ENTERPRISE AL , 36330	☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	D FRENCH, WILLIAM RAY 10490 KY. 662, LEWISPORT, KY., 42351 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PTMD FRENCH, NELLIE MAE 10716 GREEN ST. WHITESVILLE KY , 42378	☐ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VSD HOWARD, MARY JANE 3186 E JAMES LEE BLVD CRESTVIEW FL , 32539	☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MAHAFFEY, JEAN F. 3618 N 12TH AV PENSACOLA FL	☒ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	D MAHAFFEY, JEAN F. 103 BEECH ST. PENSACOLA, FLORIDA 32506 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D COURTWRIGHT, IRENE 221 8TH AVENUE E TWIN FALLS ID , 83301	☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CREWS, ROSE M 5248 MORRIS ST CRESTVIEW FL , 32539	☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	☐ Change ☐ Addition

CR2E034 (9/96)

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

4-24-97/502-233-5042

SIGNATURE: Nellie M. French NELLIE M. FRENCH