

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAY -1 PM 2:37

DOCUMENT # 804179 (0)

1. Corporation Name
AMOCO OIL COMPANY

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business Mailing Address
200 EAST RANDOLPH DRIVE MAIL CODE 2401A CHICAGO IL 60601-7125 US
200 EAST RANDOLPH DRIVE MAIL CODE 2401A CHICAGO IL 60601-7125 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	3a. Date of Last Report
21		26		10/31/1933	04/29/1994
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	Applied For
22		27		36-2440313	Not Applicable
City & State		City & State		5. Certificate of Status Desired	\$8.75 Additional Fee Required
23		28		<input type="checkbox"/>	
Zip	Country	Zip	Country	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
24	25	29	30	<input type="checkbox"/>	
9. Name and Address of Current Registered Agent				8. This corporation has liability for intangible tax under §. 199.032, Florida Statutes	
				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
THE PRENTICE-HALL CORPORATION SYSTEM INC. 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301				81 Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				83			
				84 City			
				FL			

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 _____ DATE _____
(Signature typed in printed form of registered agent and filed as applicable) (Date typed in printed form of registered agent and filed as applicable)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	WILLIAMS, M.C.	11 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	200 E RANDOLPH DR	12 NAME	
STREET ADDRESS	CHICAGO, IL 60601	13 STREET ADDRESS	
CITY, ST, ZIP		14 CITY, ST, ZIP	Chicago, Illinois 60601
TITLE	AS	21 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SIDDALL, J. L. (ASST)	22 NAME	
STREET ADDRESS	200 E RANDOLPH DR	23 STREET ADDRESS	
CITY, ST, ZIP	CHICAGO, IL 0	24 CITY, ST, ZIP	Chicago, Illinois 60601
TITLE	S	31 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HAUGEN, K.A.	32 NAME	
STREET ADDRESS	200 E RANDOLPH DR	33 STREET ADDRESS	CLAYTON, P. J.
CITY, ST, ZIP	CHICAGO, IL 0	34 CITY, ST, ZIP	Chicago, Illinois 60601
TITLE	PD	41 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FORD, W. D	42 NAME	
STREET ADDRESS	200 E RANDOLPH DR	43 STREET ADDRESS	
CITY, ST, ZIP	CHICAGO, IL 0	44 CITY, ST, ZIP	Chicago, Illinois 60601
TITLE	D	51 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WINTERS, S. R.	52 NAME	
STREET ADDRESS	200 E RANDOLPH DR	53 STREET ADDRESS	
CITY, ST, ZIP	CHICAGO, IL 0	54 CITY, ST, ZIP	Chicago, Illinois 60601
TITLE	VD	61 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	EVANS, R. E	62 NAME	
STREET ADDRESS	200 E RANDOLPH DR	63 STREET ADDRESS	RAUSCHER, R. J.
CITY, ST, ZIP	CHICAGO, IL 0	64 CITY, ST, ZIP	Chicago, Illinois 60601

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119 07(1)(b), 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 307, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report, or on an attachment with an address.

SIGNATURE: *J. L. Siddall* J. L. Siddall (Signature) 307 256-4476
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR