

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
May 20 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **805420** (7)
1. Corporation Name
TEXACO, INC.

Principal Place of Business
**2000 WESTCHESTER AVENUE
WHITE PLAINS NY 10650
US**

Mailing Address
**P.O. BOX 1404
DEPT. 007
HOUSTON TX 77251-1404
US**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country		3. Date Incorporated or Qualified 10/17/1941	
				4. FEI Number 74-1383447 Applied For Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent THE PRENTICE-HALL CORPORATION SYSTEM INC. 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301				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	
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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	PCE	<input type="checkbox"/> DELETE		1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	BJUR, PETER I			1.2 NAME			
STREET ADDRESS	2000 WESTCHESTER AVE			1.3 STREET ADDRESS			
CITY - ST - ZIP	WHITE PLAINS NY			1.4 CITY - ST - ZIP			
TITLE	SVP	<input type="checkbox"/> DELETE		2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	BLACK, ROBERT C			2.2 NAME			
STREET ADDRESS	2000 WESTCHESTER AVENUE			2.3 STREET ADDRESS			
CITY - ST - ZIP	WHITE PLAINES NY			2.4 CITY - ST - ZIP			
TITLE	AS	<input type="checkbox"/> DELETE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	ATTERMEIER, F.J.			3.2 NAME			
STREET ADDRESS	1111 BAGBY ST			3.3 STREET ADDRESS			
CITY - ST - ZIP	HOUSTON TX 77002			3.4 CITY - ST - ZIP			
TITLE	VS	<input type="checkbox"/> DELETE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	DAVIDSON, CARL B			4.2 NAME			
STREET ADDRESS	2000 WESTCHESTER AVE.			4.3 STREET ADDRESS			
CITY - ST - ZIP	WHITE PLAINES NY			4.4 CITY - ST - ZIP			
TITLE	T	<input type="checkbox"/> DELETE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	LINK, J. F.			5.2 NAME			
STREET ADDRESS	2000 WESTCHESTER AVE.			5.3 STREET ADDRESS			
CITY - ST - ZIP	WHITE PLAINES NY			5.4 CITY - ST - ZIP			
TITLE	AS	<input type="checkbox"/> DELETE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	NAMMOUR, A. J.			6.2 NAME			
STREET ADDRESS	1111 BAGBY ST			6.3 STREET ADDRESS			
CITY - ST - ZIP	HOUSTON TX			6.4 CITY - ST - ZIP			

14. I 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.

SIGNATURE: *Fredric J. Attermeier* **FREDRIC J. ATTERMEIER.** APR 28 1998 (713) 757-10814

CR2E034 (10/97)