Applied For

\$8.75 Additional

Fee Required

Not Applicable

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

2. Principal Place of Business

Suite, Apt. #, etc.

21

22



## Katherine Harris

2a. Mailing Address

Suite, Apt. #, etc.

26

27

| FILE NOW: FILING                                | FEE AFTER | FILED   |  |  |  |
|---|-----------|---|--|--|--|
| PROFIT CORPORATION ANNUAL REPORT 1999           |           | FLORIDA DEPARTMENT OF STATE  Katherine Harris  Secretary of State  DIVISION OF CORPORATIONS | May 19, 1999 8:00 an<br>Secretary of State<br>05-19-1999 90004 003 *1,350.00 |  |  |
| DOCUMENT # 80  1. Corporation Name TEXACO, INC. | 5420      |   |  |  |  |
| incipal Place of Business Mailing Address       |           | iling Address   | 112010) (811) 8818 8111 81314 1191 2211 2121 2121 2131 2131 2131 2131        |  |  |
| WHITE PLAINS NY 10650 DEPT                      |           | . BOX 1404<br>)T. 007<br>JSTON TX 77251-1404  | DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed  10/17/1941     |  |  |

FEI Number

74-1383447

5. Certifcate of Status Desired

City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Country Ζip Country Zip 8. This corporation owes the current year Intangible Personal Property Tax. □No 30 24 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name THE PRENTICE-HALL CORPORATION SYSTEM INC. 82 Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET SUITE 105 83 TALLAHASSEE FL 32301 85 Zip Code 84 City

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 or printed traine or registered agent and one in expression. |                         |          |                    |                 |                  |          |            |  |  |
| 12.   | OFFICERS AND DIRE       |          | 13.                | ADDITIONS/CHANG | ES TO OFFICERS A |          |            |  |  |
| TITLE   | PCE                     | ☐ DELETE | 1.1 TITLE          |                 |                  | Change   | ☐ Addition |  |  |
| NAME  | BIJUR, 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                     | ☐ DELETE | 2.1 TITLE          |                 |                  | Change   | ☐ Addition |  |  |
| NAME  | BLACK, ROBERT C         |          | 2.2 NAME           |                 |                  |          |            |  |  |
| STREET ADORESS  | 2000 WESTCHESTER AVENUE |          | 2.3 STREET ADDRESS |                 |                  |          |            |  |  |
| CITY-ST-ZIP   | WHITE PLAINES NY        |          | 2. 4 CITY- ST-ZIP  | 1               |                  |          |            |  |  |
| TITLE   | AS                      | DELETE   | 3.1 TITLE          |                 | eltary           | Change   | Addition   |  |  |
| NAME  | ATTERMEIER, F.J.        |          | 3.2 NAME           | G.C. Morly      | ,                |          |            |  |  |
| STREET ADDRESS  | 1111 BAGBY ST           |          | 3.3 STREET ADDRESS | IIII Bagby 8    |                  |          |            |  |  |
| CITY-ST-ZIP   | HOUSTON TX 77002        |          | 3.4. CITY-ST-ZIP   | Laguston Texa.  | 5 77002 4        |          |            |  |  |
| TITLE   | VS                      | DELETE   | 4.1 TITLE          | Secretary,      |                  | ☐ Change | Addition   |  |  |
| NAME  | DAVIDSON, CARL B        |          | 4. 2 NAME          | K.M. KM KUNGO   |                  |          |            |  |  |
| STREET ADDRESS  | 2000 WESTCHESTER AVE.   |          | 4.3 STREET ADDRESS | 2000 wentchests | ir Alle.         |          |            |  |  |
| CITY-ST-ZIP   | WHITE PLAINS NY         |          | 4.4 CITY-ST-ZIP    | White Plains,   | MY 1066          |          |            |  |  |
| TITLE   | T                       | ☐ DELETE | 5.1 TITLE          |                 | , ,              | ☐ Change | ☐ 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                      | ☐ DELETE | 6.1 TITLE          |                 |                  | Change   | ☐ Addition |  |  |
| NAME  | NAMMOUR, A. J.          |          | 6.2 NAME           |                 |                  |          |            |  |  |
| STREET ADDRESS  | 1111 BAGBY ST           |          | 6.3 STREET ADDRESS |                 |                  |          |            |  |  |
| מול דפ עדום   | 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, and attachment with an address, with all other like empowered.

SIGNATURE: