

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

FILED
May 14 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 # 818379 (0)

1. Corporation Name

MOBIL PHOSPHATE MINERALS INC.

Principal Place of Business

86 LAKERIDGE PARKWAY
ASHLAND VA 23005
US

Mailing Address

3225 GALLOWES ROAD
STATE TAX DEPT.
FAIRFAX VA 22037
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/28/1964

4. FEI Number

13-6170457

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22 City & State

23

Zip

Country

24

2a. Mailing Address

25

Suite, Apt. #, etc.

27 City & State

28

Zip

Country

29

30

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

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

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

PD
THOMAS, D.W.
3225 GALLOWES ROAD
FAIRFAX VA 22037

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

VD
TRENTS, J.M.
3225 GALLOWES ROAD
FAIRFAX VA 22037

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

S
STEVENSON, P.A.
3225 GALLOWES RD
FAIRFAX VA 22037

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

T
SARNOWSKI, J.A.
3225 GALLOWES RD
FAIRFAX VA 22037

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

C
RUFF, C.D.
3225 GALLOWES RD
FAIRFAX VA 22037

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

AC
LOPEZ, S.A.
3225 GALLOWES RD
FAIRFAX VA 22037

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

☒ Change ☐ Addition

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

TRENT, J. M.

☐ Change ☐ Addition

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

☒ Change ☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

CD

☐ Change ☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

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.

Assistant

CR2E034 (10/97)