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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 821290

1. Corporation Name

PENNZOIL COMPANY

FILED					
Apr 26, 1999 8:00 am					
Secretary of State					
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04-26-1999 90061 028 ***150.00



Principal Place of Business Mailing Address						
PENNZOIL PLAC	PENNZOIL PLACE	INZOIL PLACE				
700 MILAM		P.O. BOX 2967			TO MOTIVIPITE IN THE ORIGIN	
HOUSTON TX 7	7002-2806	HOUSTON TX 77252-2967			DO NOT WRITE IN THIS SPACE	
บร		US			3. Date Incorporated or Qualifed	
•					04/01/1968	
2. Principal Place of Business 2a. Mailing Address			· · ·		4. FEI Number Applied For	
	26			74-1597290 Not Applicable		
21 26					_ \$8.75 Additional	
				5. Certificate of Status Desired Fee Required		
22 27 City & State						
City & State	9	City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
23 28					11001.010	
	Zip Country Zip C		Country	,	8. This corporation owes the current year Intangible	
24	25 29 30)		Personal Property Tax. Yes No	
	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New Registered Agent	
			81	Name		
CTC	CORPORATION SYSTEM	•	82	82 Street Address (P.O. Box Number is Not Acceptable)		
1200	S. PINE ISLAND ROAD		62	Sueet	Audiess (F.O. Box Number is Not Acceptable)	
PLAN	NTATION FL 33324		83	1		
'-"						
			84	City	85 Zip Code	
					FL 65 25 355	
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statutes,	the abov	e-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.						
agent. Lam tambiar with, and accept the congations of, section out 1000, it foliate clearities.						
SIGNATURE	Signature, typed or printed name of registered agen	t and title if applicable. (NOTE: Re	nistered Age	nt signature re	equired when reinstating) DATE	
Organizate types of plants and pl					ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
12.	CCEO	DELETE	1.1 TITLE		☐ Change ☐ Addition	
i l			1.2 NAME		C	
NAME	PATE, JAMES L.					
STREET ADDRESS			1.3 STREE	TADDRESS	711 Louisiana	
CITY-\$T-ZIP	HOUSTON TX 77002-2806		1.4 CITY-5	T-ZIP	Houston, TX 77002-2716	
TITLE	PC00	☐ DELETE	2.1 TITLE	i	PCEOD Change Addition	
NAME	Chesebro', Stephen D.		2.2 NAME]		
STREET ADDRESS	700 MILAM ST		2.3 STREE	TADDRESS	711 Louisiana	
CITY-ST-ZIP	HOUSTON TX 77002-2806			ST-ZIP	Houston, TX 77002-2716	
TITLE	VS	☐ DELETE	3.1 TITLE		S	
			3.2 NAME			
NAME	CONDIT, LINDA F.		1		Linda L. Meagher	
STREET ADDRESS	. ou mile un official		3.3 STREE	TADDRESS	711 Louisiana	
CITY-ST-ZIP			3.4. CITY-	ST-ZIP	Houston, TX 77002-2716	
TITLE	AS DELETE 4.17		4.1 TITLE		SVP/Treas Change X Addition	
. NAME	MCNEW, JOAN M.	NEW, JOAN M. 4.2			Bruce K. Misamore	
STREET ADDRESS	700 MILAM		4.3 STREE	TADDRESS	711 Louisiana	
CITY-ST-ZIP	HOUSTON TX 77002-2806		4.4 CITY-5		Houston, TX 77002-2716	
TITLE	n	₹ DELETE	5.1 TITLE		I _ I Change 1/ I Addition I	
	BOVAIDD W. I	Х	5.2 NAME			
NAME	BOVAIRD,W.J.		1	TADDRESS	Henry R. Hamman	
STREET ADDRESS	823 S. DETROIT				3270 West_Main	
CITY-ST-ZIP	TULSA OK 74119		5.4 CITY-	ST-ZIP	Houston TX 77098	
TITLE	D	X DELETE	6.1 TITLE		D Change X Addition	
NAME	COCKRELL, ERNEST H		6.2 NAME		Robert A. Mosbacher, Jr.	
STREET ADDRESS	1600 SMITH STE 4600		6.3 STREE	TADDRESS	712 Main, Suite 2200	
	HOUSTON TX 77002-7348		6.4 CITY-5	ST- 7IP	Houston, TX 77002-3290	
CITY-ST-ZIP	TOUSION IA //UUZ-/348		0.4 011124	· ·	100300113 17 77002 3230	

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, with all other like empowered.

SIGNATURE:

(713) 546-8955