

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 24, 2003 8:00 am**  
**Secretary of State**

03-24-2003 91009 035 \*\*\*150.00

**DOCUMENT # 836926**

1. Entity Name  
**MOBIL CORPORATION**



Principal Place of Business  
**800 BELL STREET  
ROOM 2605  
HOUSTON TX 77002  
US**

Mailing Address  
**ATTN: STATE TAX DEPT., ROOM 2605  
800 BELL STREET  
HOUSTON TX 77002  
US**



2. Principal Place of Business  
**5959 LAS COLINAS BLVD.**

3. Mailing Address  
  
Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State  
**IRVING, TX 750**

City & State

4. FEI Number **13-2859050**

Applied For  
Not Applicable

Zip Country  
**75039 US**

Zip Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**THE PRENTICE-HALL CORPORATION SYSTEM INC.  
1201 HAYS STREET  
SUITE 105  
TALLAHASSEE FL 32301**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-appointing)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2003 Fee will be \$550.00  
Make Check Payable to Florida Department of State**

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☒ Delete  
NAME YALEY, C J  
STREET ADDRESS 3225 GALLOWES ROAD  
CITY-ST-ZIP FAIRFAX VA 22037

TITLE PRESIDENT/DIRECTOR ☒ Change ☐ Addition  
NAME RIPPE, R. D. JR.  
STREET ADDRESS 5959 Las Colinas Blvd.  
CITY-ST-ZIP Irving, TX 75039

TITLE VPTD ☒ Delete  
NAME ARNHEIM, W.R.  
STREET ADDRESS 3225 GALLOWES RD  
CITY-ST-ZIP FAIRFAX VA 22037

TITLE VICE PRESIDENT/DIRECTOR ☒ Change ☐ Addition  
NAME FOX, T. J.  
STREET ADDRESS 5959 Las Colinas Blvd.  
CITY-ST-ZIP Irving, TX 75039

TITLE SD ☒ Delete  
NAME STEVENSON, P.A.  
STREET ADDRESS 3225 GALLOWES RD  
CITY-ST-ZIP FAIRFAX VA 22037

TITLE SECRETARY ☒ Change ☐ Addition  
NAME MILLER, J. D.  
STREET ADDRESS 5959 Las Colinas Blvd.  
CITY-ST-ZIP Irving, TX 75039

TITLE VPAS ☒ Delete  
NAME GARNEY, G.G.  
STREET ADDRESS 3225 GALLOWES RD  
CITY-ST-ZIP FAIRFAX VA 22037

TITLE TREASURER/DIRECTOR ☒ Change ☐ Addition  
NAME HALSEY, T. S.  
STREET ADDRESS 5959 Las Colinas Blvd.  
CITY-ST-ZIP Irving, TX 75039

TITLE AC ☒ Delete  
NAME LOPEZ, S.A.  
STREET ADDRESS 800 BELL STREETE  
CITY-ST-ZIP HOUSTON TX 77002

TITLE ASSISTANT SECRETARY ☒ Change ☐ Addition  
NAME KATZ, R. O.  
STREET ADDRESS 800 BELL STREET  
CITY-ST-ZIP HOUSTON, TX 77002

TITLE AT ☒ Delete  
NAME CAVALIERE, A.L.  
STREET ADDRESS 3225 GALLOWES RD  
CITY-ST-ZIP FAIRFAX VA 22037

TITLE CONTROLLER ☒ Change ☐ Addition  
NAME HUPLITS, W. N.  
STREET ADDRESS 5959 Las Colinas Blvd.  
CITY-ST-ZIP Irving, TX 75039

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03/20/03

713-656-5022

Date

Daytime Phone #

CR2E034 (10/02)