


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

055521E

**FILED**  
**Mar 31, 1999 8:00 am**  
**Secretary of State**

03-31-1999 90015 032 \*\*\*150.00

<b>PROFIT CORPORATION ANNUAL REPORT 1999</b>		<b>FLORIDA DEPARTMENT OF STATE</b> <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # 840667**  
 1. Corporation Name  
**CHEVRON NATURAL GAS SERVICES, INC.**

Principal Place of Business 575 MARKET ST. SAN FRANCISCO CA 94105	Mailing Address 225 BUSH ST ROOM 1207 SAN FRANCISCO CA 94104 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21	2a. Mailing Address 26 575 Market Street	4. FEI Number 51-0269422	Applied For Not Applicable
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27 Room 2648	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
City & State 23	City & State 28 San Francisco, CA	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
Zip 24	Country 25	Zip 29 94105	Country 30 U.S.

9. Name and Address of Current Registered Agent <b>THE PRENTICE-HALL CORPORATION SYSTEM, INC.</b> 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 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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE AS <input type="checkbox"/> DELETE	NAME JONES, J. H. JR.	1.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS 225 BUSH ST.	CITY-ST-ZIP SAN FRANCISCO CA	1.2 NAME	
TITLE PD <input type="checkbox"/> DELETE	NAME DUNN, D.R.	1.3 STREET ADDRESS	
STREET ADDRESS 935 GRAVIER STREET	CITY-ST-ZIP NEW ORLEANS LA 70112	1.4 CITY-ST-ZIP	
TITLE VP <input type="checkbox"/> DELETE	NAME STEVENSON, D.R.	2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS <del>103 MCKINNEY</del>	CITY-ST-ZIP HOUSTON TX 77010	2.2 NAME	
TITLE T <input type="checkbox"/> DELETE	NAME SMAY, D.P.	2.3 STREET ADDRESS	
STREET ADDRESS 2005 DIAMOND BLVD.	CITY-ST-ZIP CONCORD CA 94520	2.4 CITY-ST-ZIP	
TITLE VP <input type="checkbox"/> DELETE	NAME <del>ROBISON, L D</del>	3.1 TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS 1301 MCKINNEY	CITY-ST-ZIP HOUSTON TX 77010	3.2 NAME	1301 McKimney
TITLE VP <input checked="" type="checkbox"/> DELETE	NAME <del>BREBER, P R</del>	3.3 STREET ADDRESS	
STREET ADDRESS 0001 BOLLINGER CANYON ROAD	CITY-ST-ZIP SAN RAMON CA 94583	3.4 CITY-ST-ZIP	
TITLE VP <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	NAME ROBISON, L D	4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS 1301 MCKINNEY	CITY-ST-ZIP HOUSTON TX 77010	4.2 NAME	
TITLE VP <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	NAME BARNHILL, D C	4.3 STREET ADDRESS	
STREET ADDRESS 1301 MCKINNEY	CITY-ST-ZIP HOUSTON TX 77010	4.4 CITY-ST-ZIP	
TITLE VP <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	NAME ROBISON, L D	5.1 TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS 1301 MCKINNEY	CITY-ST-ZIP HOUSTON TX 77010	5.2 NAME	
TITLE VP <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	NAME BARNHILL, D C	5.3 STREET ADDRESS	
STREET ADDRESS 1301 MCKINNEY	CITY-ST-ZIP HOUSTON TX 77010	5.4 CITY-ST-ZIP	
TITLE VP <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	NAME BARNHILL, D C	6.1 TITLE <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
STREET ADDRESS 1301 MCKINNEY	CITY-ST-ZIP HOUSTON TX 77010	6.2 NAME	
TITLE VP <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	NAME BARNHILL, D C	6.3 STREET ADDRESS	
STREET ADDRESS 1301 MCKINNEY	CITY-ST-ZIP HOUSTON TX 77010	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, with all other like empowered.

SIGNATURE: C. N. MacFarlane DATE: MAR 25 1999 DAYTIME PHONE #: 415-894-7700

CR2E034 (1/198)