

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 850009

FILED
Apr 22, 2005
Secretary of State

Entity Name: MOBIL AUTO CLUB INC.

Current Principal Place of Business:

1201 ELM ST
DALLAS, TX 75270

New Principal Place of Business:

4500 DACOMA
HOUSTON, TX 77092

Current Mailing Address:

ATTN: STATE TAX DEPT.
800 BELL STREET- RM 2605
HOUSTON, TX 77002

New Mailing Address:

ATTN: STATE TAX DEPT.
800 BELL STREET- RM 2441Q
HOUSTON, TX 77002

FEI Number: 75-1771850

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

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

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.

SIGNATURE:

04/22/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: TAULE, D.R.
Address: 3225 GALLOWES RD
City-St-Zip: FAIRFAX, VA 22037

Title: T () Delete
Name: WILSON, MARK R
Address: 3225 GALLOWES ROAD
City-St-Zip: FAIRFAX, VA 22037

Title: AS () Delete
Name: SMOTHERS, LYNN A
Address: 800 BELL STREET
City-St-Zip: HOUSTON, TX 77002

Title: D () Delete
Name: HODGDON, GREGORY T
Address: 7125 S.W. 114 STREET
City-St-Zip: VILLAGE OF PINECREST, FL 33156

Title: PD () Delete
Name: SCHAEFER, MARK B
Address: 4500 DACOMA
City-St-Zip: HOUSTON, TX 77092

Title: C () Delete
Name: HOLZER, CECELIA D
Address: 3225 GALLOWES ROAD
City-St-Zip: FAIRFAX, VA 22037

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S (X) Change () Addition
Name: TAULE, DEBORAH R
Address: 3225 GALLOWES RD
City-St-Zip: FAIRFAX, VA 22037

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ASSISTANT SECRETARY

AS

04/22/2005

Electronic Signature of Signing Officer or Director

Date