

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 17, 2001 8:00 am**  
**Secretary of State**

05-17-2001 91299 030 \*\*\*550.00

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**DOCUMENT # 853319**

1. Entity Name  
**MARATHON OIL COMPANY**

Principal Place of Business <b>5555 SAN FELIPE RD          MARATHON OIL COMPANY          HOUSTON TX 77056          US</b>	Mailing Address <b>ATTN: EXCISE TAX DEPT 539 S. MAIN ST          539 SOUTH MAIN ST          FINDLAY OH 45840          US</b>
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**U S S O A V**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address		4. FEI Number <b>25-1410539</b>		Applied For	
Suite, Apt. #, etc.		539 SOUTH MAIN STREET				Not Applicable	
City & State		FINDLAY, OH		5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75</b> Additional Fee Required	
Zip	Country	Zip	Country				
		45840	US				

6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent			
<b>CT CORPORATION SYSTEM          1200 S. PINE ISLAND ROAD          PLANTATION FL 33324</b>				Name			
				Street Address (P.O. Box Number is Not Acceptable)			
				City		<b>FL</b>	

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.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. <input type="checkbox"/>	<b>FILE NOW!!! FEE IS \$150.00</b> <b>After MAY 1, 2001 Fee will be \$550.00</b> <b>Make Check Payable to Department of State</b>	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
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11. OFFICERS AND DIRECTORS				12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE	PD	<input checked="" type="checkbox"/> Delete		TITLE	PD	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	BEGHINI, V.G.			NAME	C. P. CAZALOT, JR		
STREET ADDRESS	5555 SAN FELIPE ROAD			STREET ADDRESS	5555 SAN FELIPE RD.		
CITY-ST-ZIP	HOUSTON TX			CITY-ST-ZIP	HOUSTON, TX 77056		
TITLE	VD	<input checked="" type="checkbox"/> Delete		TITLE	VD	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	GIARDINI, C.P.			NAME	P. G. BEHRMAN		
STREET ADDRESS	5555 SAN FELIPE ROAD			STREET ADDRESS	5555 SAN FELIPE RD.		
CITY-ST-ZIP	HOUSTON TX 77056			CITY-ST-ZIP	HOUSTON, TX 77056		
TITLE	VD	<input checked="" type="checkbox"/> Delete		TITLE	VD	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	HERNANDEZ, R.M.			NAME	R. S. KEISLER		
STREET ADDRESS	600 GRANT ST.			STREET ADDRESS	5555 SAN FELIPE RD.		
CITY-ST-ZIP	PITTSBURGH PA			CITY-ST-ZIP	HOUSTON, TX 77056		
TITLE	VD	<input checked="" type="checkbox"/> Delete		TITLE	VD	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	MADISON, W F			NAME	P. J. KUNTZ		
STREET ADDRESS	5555 SAN FELIPE ROAD			STREET ADDRESS	5555 SAN FELIPE RD.		
CITY-ST-ZIP	HOUSTON TX			CITY-ST-ZIP	HOUSTON, TX 77056		
TITLE	AS	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	HALEY, J.R.			NAME			
STREET ADDRESS	539 S MAIN ST			STREET ADDRESS			
CITY-ST-ZIP	FINDLAY OH			CITY-ST-ZIP			
TITLE	S	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	SCHWIND, JR. W			NAME			
STREET ADDRESS	5555 SAN FELIPE ROAD			STREET ADDRESS			
CITY-ST-ZIP	HOUSTON TX			CITY-ST-ZIP			

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** J. R. Haley **J. R. Haley** Asst. Sec. April 30, 2001 (419) 421-3015  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)