2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000006153

Entity Name: EXXONMOBIL SALES AND SUPPLY CORPORATION

FILED Apr 12, 2006 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
3225 GALLOWS ROAD FAIRFAX, VA 22037							
Current Mailing Address:				New Mailing Address:			
ATTN STATE TAX DEPT 800 BELL STREET RM 2441 HOUSTON, TX 77002				800 BELL STREET CORP-EMB-2441 HOUSTON, TX 77002			
FEI Number:	13-1995021	FEI Number Applied For ()	FEI Num	ber Not Appli	cable ()	Certificate o	of Status Desired ()
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:							
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 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:							
Electronic Signature of Registered Agent Election Campaign Financing Trust Fund Contribution ().						Da	te
OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:							
Title: Name: Address: City-St-Zip: Title: Name: Address:	PCD () E HOUSTON, D M 3225 GALLOWS FAIRFAX, VA 22	Pelete ROAD 037 Pelete		Title: Name: Address: City-St-Zip: Title: Name: Address:	PD (X) C HOUSTON, D M 3225 GALLOWS FAIRFAX, VA 220	Change ()	Addition
City-St-Zip: Title: Name: Address: City-St-Zip:	FAIRFAX, VA 22 S () DIAZ, S L 3225 GALLOWS FAIRFAX, VA 22	Delete ROAD		City-St-Zip: Title: Name: Address: City-St-Zip:	() C	Change ()/	Addition
Title: Name: Address: City-St-Zip:	T () E THOMPSON, A E 3225 GALLOWS FAIRFAX, VA 22	RD		Title: Name: Address: City-St-Zip:	() C	Change ()	Addition
Title: Name: Address: City-St-Zip:	AS ()E SMOTHERS, LYN 800 BELL STREE HOUSTON, TX 7	ĒΤ		Title: Name: Address: City-St-Zip:	AS (X) O JORDAN, R W 800 BELL STREE HOUSTON, TX 7		Addition
Title: Name: Address: City-St-Zip:	D ()E KELLY, S T 3225 GALLOWS FAIRFAX, VA 22			Title: Name: Address: City-St-Zip:	()0	Change ()/	Addition

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: ROBERT W JORDAN AS 04/12/2006