

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **F94000000665**

1. Entity Name

EXXON WORLDWIDE TRADING COMPANY

FILED
Apr 20, 2001 8:00 am
Secretary of State

04-20-2001 90005 041 ***150.00

Principal Place of Business

**200 PARK AVENUE
FLORHAM PARK NJ 07932
US**

Mailing Address

**P.O. BOX 392
ROOM 323
HOUSTON TX 77001-0392
US**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

P. O. Box 392

Suite, Apt. #, etc.

2605

City & State

Houston, TX

Zip

77001-0392

Country

Harris

4. FEI Number **59-1708847**

Applied For

Not Applicable

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

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525**

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD** ☒ Delete
NAME **HOUSTON, D.M.**
STREET ADDRESS **200 PARK AVENUE**
CITY-ST-ZIP **FLORHAM PARK NJ**

TITLE **President/Director** ☐ Change ☒ Addition
NAME **L. J. Cavanaugh**
STREET ADDRESS **200 Park Avenue**
CITY-ST-ZIP **Florham Park, NJ 07932**

TITLE **D** ☒ Delete
NAME **FITZGERALD, C. M**
STREET ADDRESS **396 ALHAMBRA CIR.**
CITY-ST-ZIP **CORAL GABLES FL**

TITLE **Vice President/Director** ☐ Change ☒ Addition
NAME **M. J. Dizio**
STREET ADDRESS **200 Park Avenue**
CITY-ST-ZIP **Florham Park, NJ 07932**

TITLE **VD** ☐ Delete
NAME **OLSEN, G. E**
STREET ADDRESS **396 ALHAMBRA CIR.**
CITY-ST-ZIP **CORAL GABLES FL**

TITLE **Executive Vice-President** ☒ Change ☐ Addition
NAME **G. E. Olsen**
STREET ADDRESS **200 Park Avenue**
CITY-ST-ZIP **Florham Park, NJ 07932**

TITLE **S** ☐ Delete
NAME **TAULE, D R**
STREET ADDRESS **200 PARK AVENUE**
CITY-ST-ZIP **FLORHAM PARK NJ 07932**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **T** ☒ Delete
NAME **VARMA, C. K**
STREET ADDRESS **200 PARK AVENUE**
CITY-ST-ZIP **FLORHAM PARK NJ**

TITLE **Treasurer** ☐ Change ☒ Addition
NAME **P. B. Baker**
STREET ADDRESS **200 Park Avenue**
CITY-ST-ZIP **Florham Park, NJ 07932**

TITLE **AS** ☒ Delete
NAME **LYNCH, JOSEPH G.**
STREET ADDRESS **800 BELL STREET**
CITY-ST-ZIP **HOUSTON TX**

TITLE **Assistant Secretary** ☐ Change ☒ Addition
NAME **S. A. Lopez**
STREET ADDRESS **800 Bell**
CITY-ST-ZIP **Houston, TX 77002**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Steven A. Lopez, Assistant Secretary 4/6/01

Date

Daytime Phone #

CR2E034 (10/00)