

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mathiam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F94000005226 (5)

1. Corporation Name

EXXON CHEMICAL HDPE INC.



Principal Place of Business

13501 KATY FREEWAY
HOUSTON TX 77079

Mailing Address

13501 KATY FREEWAY
HOUSTON TX 77079

2. Principal Place of Business

2a. Mailing Address

21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.
22	City & State	27	City & State
23	Zip	28	Zip
24	Country	29	Country
25		30	

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION FL 33324

3. Date Incorporated or Qualified

10/07/1994

3a. Date of Last Report

04/19/1995

4. FLE Number

74-2594436

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes. ☐ Yes ☒ No

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

FL

11. Pursuant to the provisions of Sections 607.0102 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 607.0506, Florida Statutes.

SIGNATURE

Signature of Registered Agent

Signature of President or Director

DATE

OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '92

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '92	
TITLE	S	1. TITLE	PRESIDENT, DIRECTOR
NAME	LYNCH, J.G.	2. NAME	R. B. NESBITT
STREET ADDRESS	800 BELL STREET, ROOM 323	3. STREET ADDRESS	13501 KATY FREEWAY
CITY-ST-ZIP	HOUSTON TX	4. CITY-ST-ZIP	HOUSTON, TEXAS 77079
TITLE	VD	5. TITLE	
NAME	LOWE, J R	6. NAME	
STREET ADDRESS	13501 KATY FREEWAY	7. STREET ADDRESS	
CITY-ST-ZIP	HOUSTON TX 77079	8. CITY-ST-ZIP	
TITLE	VD	9. TITLE	
NAME	RIZZO, G A	10. NAME	
STREET ADDRESS	13501 KATY FREEWAY	11. STREET ADDRESS	
CITY-ST-ZIP	HOUSTON TX 77079	12. CITY-ST-ZIP	
TITLE	S	13. TITLE	
NAME	MURPHY, P D	14. NAME	
STREET ADDRESS	13501 KATY FREEWAY	15. STREET ADDRESS	
CITY-ST-ZIP	HOUSTON TX 77079	16. CITY-ST-ZIP	
TITLE	T	17. TITLE	
NAME	BASS, F W	18. NAME	
STREET ADDRESS	13501 KATY FREEWAY	19. STREET ADDRESS	
CITY-ST-ZIP	HOUSTON TX 77079	20. CITY-ST-ZIP	
TITLE	AS	21. TITLE	
NAME	HERNANDEZ, C L	22. NAME	
STREET ADDRESS	13501 KATY FREEWAY	23. STREET ADDRESS	
CITY-ST-ZIP	HOUSTON TX 77079	24. CITY-ST-ZIP	

14. I do hereby certify that the information supplied on this report is true and correct, and I do not qualify for the exemption stated in Section 119.07(4)(b), 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 registered agent or authorized person, to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this change form or on an authorized business card.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ASSISTANT SECRETARY

3-28-96

(713) 656-1807

CR2E034 (12/95)