2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06871

FILED Apr 19, 2007 Secretary of State

Entity Name: EXXONMOBILE AVIATION INC.					
Current Principal Place of Business:			New Principal Place of Business:		
3225 GALL FAIRFAX, Y	OWS ROAD VA 22037	US			
Current Mailing Address:			New Mailing Address:		
800 BELL S CORP-EMI HOUSTON		US			
FEI Number:	75-1728755	FEI Number Applied For ()	FEI Number Not Appl	icable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and	Name and Address of New Registered Agent:	
1201 HAYS SUITE 105		CORPORATION SYSTEM INC.			
The above in the State		submits this statement for the po	urpose of changing i	ts registered office or registered agent, or both,	
SIGNATUR	RE:				
	Electro	nic Signature of Registered Age	nt	Date	
Election Can	npaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECT				S/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD (CRAMER, HAR 3225 GALLOW FAIRFAX, VA	S RD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S (LAVERY, JOAN 3225 GALLOW FAIRFAX, VA	^r RD	Title: Name: Address: City-St-Zip:	S (X) Change () Addition GAVRON, CATHERINE J 3225 GALLOW RD FAIRFAX, VA 22037	
Title: Name: Address: City-St-Zip:	T (SCHLECKSER 3225 GALLOW FAIRFAX, VA	RD	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	VPD (RUSK, HERBE 3225 GALLOW FAIRFAX, VA	S ROAD	Title: Name: Address: City-St-Zip:	VPD (X) Change () Addition TURCHI, ANTHONY M 3225 GALLOWS ROAD FAIRFAX, VA 22037	
Title: Name: Address: City-St-Zip:	D (MILTON, BRYA 3225 GALLOW FAIRFAX, VA	S RD	Title: Name: Address: City-St-Zip:	D (X) Change () Addition WARREN, KENNETH A 3225 GALLOWS RD FAIRFAX, VA 22037	
Title: Name:	AS (JORDAN, ROB) Delete ERT W	Title: Name:	AS (X) Change () Addition LIGHTFIELD, LARRY D	

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.

Address:

City-St-Zip:

800 BELL STREET

HOUSTON, TX 77002

SIGNATURE: LARRY D LIGHTFIELD AS 04/19/2007

800 BELL STREET

HOUSTON, TX 77002

Address:

City-St-Zip: