

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # P22016 (0)

1. Corporation Name

TEXACO REFINING AND MARKETING (EAST) INC.



Principal Place of Business

Mailing Address

2000 WESTCHESTER AVE  
WHITE PLAINS NY 10650  
US

1111 BAGBY ST  
PO BOX 4686  
HOUSTON TX 77210-4686  
US

3. Date Incorporated or Qualified  
12/07/1988

3a. Date of Last Report  
05/01/1995

4. FEI Number

51-0285314

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

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM INC.  
1201 HAYS STREET  
SUITE 105  
TALLAHASSEE FL 32301

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent's signature required when registering.)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	VT	<input type="checkbox"/> DELETE
NAME	LINK, J. F.	
STREET ADDRESS	2000 WESTCHESTER AVE.	
CITY-ST-ZIP	WHITE PLAINS NY	
TITLE	AS	<input type="checkbox"/> DELETE
NAME	KOCH, R.E.	
STREET ADDRESS	2000 WESTCHESTER AVE	
CITY-ST-ZIP	WHITE PLAINS NY	
TITLE	AS	<input checked="" type="checkbox"/> DELETE
NAME	WOODARD, H. R.	
STREET ADDRESS	4800 FOURNANCE PLACE	
CITY-ST-ZIP	BELLAIRE TX	
TITLE	S	<input type="checkbox"/> DELETE
NAME	DAVIDSON, C.B.	
STREET ADDRESS	2000 WESTCHESTER AVE	
CITY-ST-ZIP	WHITE PLAINS NY	
TITLE	PD	<input checked="" type="checkbox"/> DELETE
NAME	MATTHEWS, T. M.	
STREET ADDRESS	1111 BAGBY STREET	
CITY-ST-ZIP	HOUSTON TX	
TITLE	CD	<input type="checkbox"/> DELETE
NAME	TILTON, G. F.	
STREET ADDRESS	1111 BAGBY ST.	
CITY-ST-ZIP	HOUSTON TX	

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	800001836328
1.4 CITY-ST-ZIP	-05/23/96--01015--036
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	***1800.00
3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	Asst. Secretary
3.3 STREET ADDRESS	F. J. Attermeier
3.4 CITY-ST-ZIP	1111 Bagby St.
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	Houston, TX 77002
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	Asst. Secretary
5.3 STREET ADDRESS	A. J. Hammour
5.4 CITY-ST-ZIP	1111 Bagby
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	Houston, TX 77002
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Fredrick J. Attermeier

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FREDRICK J. ATTERMEIER  
ASSISTANT SECRETARY

Date

29 Apr 96

SP-8-1-96

CR2E034 (12/95)