

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.**  
**AMOUNT DUE ON OR BEFORE 6/15/95: \$275 (IF DISSOLVED, MEMBERSHIP AMOUNT DUE TO REINSTATE: \$375)**

**PROFIT CORPORATION ANNUAL REPORT 1995**



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

**FILED**

1995 JUL 11 AM 10:17

SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

**DOCUMENT # P26724 (5)**  
 1. Corporation Name  
**ORYX GAS MARKETING COMPANY**

Principal Place of Business Mailing Address  
 P. O. BOX 2880 P. O. BOX 2880  
 DALLAS TX 75221-9880 DALLAS TX 75221-9880

DO NOT WRITE IN THIS SPACE.

3. Date incorporated or Qualified **10/27/1989** 3a. Date of Last Report **02/09/1994**  
 4. FEI Number **75-2281077** 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 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.  
 22 City & State 27 City & State  
 23 Zip Country 28 Zip Country  
 24 25 29 30

9. Name and Address of Current Registered Agent  
**CT CORPORATION SYSTEM**  
**1200 S. PINE ISLAND ROAD**  
**PLANTATION FL 33324**

10. Name and Address of New Registered Agent  
 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 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	DP
NAME	WHITSITT, WILLIAM F
STREET ADDRESS	5509 WEATHERBY LANE
CITY-ST-ZIP	PLANO TX
TITLE	VP
NAME	BURDETT, MICHAEL S.
STREET ADDRESS	8404 FOREST LANE #602
CITY-ST-ZIP	DALLAS TX
TITLE	VP
NAME	GUMP, GERALD B
STREET ADDRESS	3200 CHIMNEY ROCK
CITY-ST-ZIP	PLANO TX
TITLE	T
NAME	CHAVENSON, DAVID F
STREET ADDRESS	1333 WATSEEDGE DR
CITY-ST-ZIP	PLANO TX
TITLE	S
NAME	SWEENEY, FRANK B.
STREET ADDRESS	9204 HEATHERDALE
CITY-ST-ZIP	DALLAS TX
TITLE	VD
NAME	HARRIS, ROLAND V.
STREET ADDRESS	481 LAKEWOOD DR.
CITY-ST-ZIP	MCKINNEY TX

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	DP	Stokes, William P., Jr.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME		4 Pinehurst Ct.	
1.3 STREET ADDRESS		Frisco, TX 75034	
1.4 CITY-ST-ZIP			
2.1 TITLE	DVP	Jerry W. Box	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		7321 Oak Bluff Drive	
2.3 STREET ADDRESS		Dallas, TX 75240	
2.4 CITY-ST-ZIP			
3.1 TITLE	VP	A. Charles Anderson	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		3311 Highland Meadow	
3.3 STREET ADDRESS		Farmers Branch, TX 75234	
3.4 CITY-ST-ZIP			
4.1 TITLE			<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY-ST-ZIP			
5.1 TITLE	S	Becky A. McGee	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		5831 London Lane	
5.3 STREET ADDRESS		Dallas, TX 75252	
5.4 CITY-ST-ZIP			
6.1 TITLE			<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME			
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 110.07(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: Becky A. McGee 6/30/95 (214) 715-4000  
Signature of Registered Agent Date Daytime Phone #

CR2E034 (3/95)