

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

96 SEP 26 PM 3:19

DOCUMENT # P26724

1. Corporation Name

ORYX GAS MARKETING COMPANY

400001373044--5

-10/14/96--01042--001

****200.00 ****200.00

Principal Place of Business

Mailing Address

P. O. BOX 2880
DALLAS TX 75221-9880

P. O. BOX 2880
DALLAS TX 75221-9880



If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified
To Do Business in Florida

10/27/1989

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

75-2297077

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1. Title(s)	2. Name of Officers and/or Directors	3. Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4. City / State / Zip
DP	STOKES, WILLIAM P JR William H. Kaufman	4 PINEHURST CT 6818 Clear Springs Circle	FRISCO TX Garland, TX 75044
DVP	BOX, JERRY W	7321 OAK BLUFF DR	DALLAS TX
VP	ANDERSON, A CHARLES Michael S. Burdett	8311 HIGHLAND MEADOW 7124 Leameadow	FARMERS BRANCH TX Dallas, TX 75248
T	CHAVENSON, DAVID F Steven J. Flowers	1333 WATSEEDGE DR 2808 McKinney Ave. #743	PLANO TX Dallas, TX 75204
S	MCGEE, BECKY A	5831 LONDON LANE	DALLAS TX
ND	HARRIS, ROLAND V. Frances G. Heartwell	481 LAKEWOOD DR 2226 Arbor Crest	MCKINNEY TX Carrollton, TX 75007

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

Name

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

Suite, Apt. #, Etc.

City

State

FL

Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of
Registered Agent

Date

REGISTERED AGENT MUST SIGN

11. Does this corporation pay any intangible tax to the
Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☒ No ☐

(See other side for information
on intangible tax.)

12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/19/96 (972) 715-4000
Day Daytime Phone #

CR2E040 (7/96)