

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P26724**

1. Corporation Name

ORYX GAS MARKETING COMPANY

Principal Place of Business

P. O. BOX 2880
DALLAS TX 75221-9880

Mailing Address

P. O. BOX 2880
DALLAS TX 75221-9880

FILED
Feb 23, 1999 8:00 am
Secretary of State

02-23-1999 90091 028 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/27/1989

4. FEI Number

75-2297077

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 owes the current year Intangible
Personal Property Tax. ☐ 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**

81 Name

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

83

84 City

FL

85 Zip Code

10. Name and Address of New Registered Agent

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **DP** ☒ DELETE
NAME **KAUFMAN, WILLIAM H**
STREET ADDRESS **6818 CLEARW SPRINGS CIRCLE**
CITY-ST-ZIP **GARLAND TX 75044**

TITLE **DVP** ☐ DELETE
NAME **BOX, JERRY W**
STREET ADDRESS **7321 OAK BLUFF DR**
CITY-ST-ZIP **DALLAS TX**

TITLE **VP** ☐ DELETE
NAME **BURDETT, MICHAEL S**
STREET ADDRESS **7124 LEAMEADOW**
CITY-ST-ZIP **DALLAS TX 75248**

TITLE **T** ☐ DELETE
NAME **FLOWERS, STEVEN J**
STREET ADDRESS **2808 MCKINNEY AVE, #743**
CITY-ST-ZIP **DALLAS TX 75204**

TITLE **S** ☐ DELETE
NAME **MC GEE, BECKY A**
STREET ADDRESS **13155 NOEL ROAD**
CITY-ST-ZIP **DALLAS TX 75240-5067**

TITLE **D** ☐ DELETE
NAME **HEARTWELL, FRANCES G**
STREET ADDRESS **2226 ARBOR CREST**
CITY-ST-ZIP **CARROLLTON TX 75007**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **DP** ☐ Change ☒ Addition
1.2 NAME **Patricia L. Horsfall**
1.3 STREET ADDRESS **13155 Noel Rd.**
1.4 CITY-ST-ZIP **Dallas, TX 75240-5067**

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

972/715-4000

Daytime Phone #

CR2E034 (1/98)