

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 805671

FILED  
Apr 18, 2012  
Secretary of State

**Entity Name:** PLACID OIL COMPANY

**Current Principal Place of Business:**

110 W 7TH ST  
TULSA, OK 741191044 US

**New Principal Place of Business:**

**Current Mailing Address:**

ATTN: STATE TAX  
P.O. BOX 300  
TULSA, OK 741020300 US

**New Mailing Address:**

**FEI Number:** 72-0395174      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND RD.  
PLANTATION, FL 33324 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: VP  
Name: ANDERSON, MICHAEL G  
Address: 5005 LBJ FREEWAY  
City-St-Zip: DALLAS, TX 75244

Title: P  
Name: ALBRECHT, WILLIAM E  
Address: 5 GREENWAY PLAZA  
City-St-Zip: HOUSTON, TX 77046

Title: VPS  
Name: PETERSON, LINDA S  
Address: 10889 WILSHIRE BLVD.  
City-St-Zip: LOS ANGELES, CA 90024

Title: VP  
Name: BUCHANAN, SHAYNE  
Address: 110 W 7TH ST  
City-St-Zip: TULSA, OK

Title: AS  
Name: ROSS, DAVID G.  
Address: 110 W. 7TH STREET  
City-St-Zip: TULSA, OK

Title: T  
Name: WILLIAMS, ROBERT J  
Address: 10889 WILSHIRE BLVD.  
City-St-Zip: LOS ANGELES, CA 90024

I hereby 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 all other like empowered.

SIGNATURE: DAVID G. ROSS

AS

04/18/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date