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Apr 30 1997 8:00am  
Secretary of State

PROFIT CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # 805671 (5)  
1. Corporation Name  
PLACID OIL COMPANY



Principal Place of Business  
110 W 7TH ST  
TULSA OK 74119-1044  
US

Mailing Address  
P.O. BOX 300  
TULSA OK 74102-0300  
US

3. Date Incorporated or Qualified 09/01/1943  
3a. Date of Last Report 02/01/1996

2. Principal Place of Business  
21 Suite, Apt. #, etc.  
22 City & State  
23 Zip Country  
24

2a. Mailing Address  
26 Suite, Apt. #, etc.  
27 City & State  
28 Zip Country  
29

4. FEI Number 72-0395174  
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

9. Name and Address of Current Registered Agent  
THE PRENTICE-HALL CORPORATION SYSTEMN, INC  
1201 HAYS STREET, SUITE 105  
TALLAHASSEE FL 32301

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 \_\_\_\_\_  
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	PCEO	<input checked="" type="checkbox"/> DELETE
NAME	MARTIN, DAVID R.	
STREET ADDRESS	1200 DISCOVERY DRIVE	
CITY-ST-ZIP	BAKERSFIELD CA	
TITLE	EVP	<input type="checkbox"/> DELETE
NAME	NIEHAUS, JAMES R.	
STREET ADDRESS	110 W. 7TH ST	
CITY-ST-ZIP	TULSA OK	
TITLE	VPS	<input type="checkbox"/> DELETE
NAME	ALDEN, JOHN W.	
STREET ADDRESS	10889 WILSHIRE BLVD.	
CITY-ST-ZIP	LOS ANGELES CA	
TITLE	VPGC	<input checked="" type="checkbox"/> DELETE
NAME	KELSEY, DARREL A.	
STREET ADDRESS	110 W. 7TH ST	
CITY-ST-ZIP	TULSA OK	
TITLE	AS	<input type="checkbox"/> DELETE
NAME	ROSS, DAVID G.	
STREET ADDRESS	110 W. 7TH STREET	
CITY-ST-ZIP	TULSA OK	
TITLE	VPT	<input checked="" type="checkbox"/> DELETE
NAME	GRUBERTH, FRED J.	
STREET ADDRESS	10889 WILSHIRE BLVD.	
CITY-ST-ZIP	LOS ANGELES CA	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	EVP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	DANIEL, E. L.	
1.3 STREET ADDRESS	1200 DISCOVERY DR.	
1.4 CITY-ST-ZIP	BAKERSFIELD CA 93309	
2.1 TITLE	EVP/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS	1200 DISCOVERY DR.	
2.4 CITY-ST-ZIP	BAKERSFIELD CA 93309	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE	AS	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	JACKSON, DONALD G.	
4.3 STREET ADDRESS	110 WEST 7TH ST.	
4.4 CITY-ST-ZIP	TULSA, OK 74119	
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE	AT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	HAVERT, J. R.	
6.3 STREET ADDRESS	10889 WILSHIRE BLVD.	
6.4 CITY-ST-ZIP	LOS ANGELES CA 90024	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: *David G. Ross* DAVID G ROSS 4-24-97 (918) 561-3497

CR2E034 (9/96)