

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

FILED
Apr 23 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # 857089 (7)
1. Corporation Name
MARSHALL & WINSTON, INC.



Principal Place of Business
P.O. BOX 50880
MIDLAND TX 79710-7880

Mailing Address
P.O. BOX 50880
MIDLAND TX 79710-7880

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 07/13/1983	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 95-0976450	
22	City & State	27	City & State	Applied For Not Applicable	
23	Zip	28	Zip	5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
24	Country	29	Country	6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No	

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

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

(NOTE: Registered Agent's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	☐ DELETE
NAME	MARSHALL, WILLIAM S	
STREET ADDRESS	6 DESTA DR. SUITE 3100	
CITY-ST-ZIP	MIDLAND, TX 0	
TITLE	D	☐ DELETE
NAME	WYMAN, JAMES T.	
STREET ADDRESS	1105 FOSHAY TWR.	
CITY-ST-ZIP	MINNEAPOLIS MN	
TITLE	VD	☐ DELETE
NAME	MARSHALL JR, SAMUEL H	
STREET ADDRESS	1216 WOODHULL	
CITY-ST-ZIP	TOPEKA, KS 00000	
TITLE	V	☐ DELETE
NAME	CHANDLER, CLARENCE R.	
STREET ADDRESS	6 DESTA DR SUITE 3100	
CITY-ST-ZIP	MIDLAND TX	
TITLE	STD	☐ DELETE
NAME	RITCHIE, ROBERT H.	
STREET ADDRESS	6 DESTA DR. SUITE 3100	
CITY-ST-ZIP	MIDLAND TX	
TITLE	ST	☐ DELETE
NAME	RICE, CHARLES G. (ASST)	
STREET ADDRESS	6 DESTA DR. SUITE 3100	
CITY-ST-ZIP	MIDLAND TX	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
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	

14. I 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

[Signature]

[Signature]

[Signature] 95-097645022

CR2E034 (10/97)