

**2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F94000002601

Entity Name: ASHLAND OIL, INC.

**Current Principal Place of Business:**

50 E RIVERCENTER BLVD  
COVINGTON, KY 41012

**Current Mailing Address:**

3499 BLAZER PKWY  
ATTN: STATE TAX DEPT  
LEXINGTON, KY 40509

FEI Number: 61-1260511

Certificate of Status Desired: No

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

CT CORPORATION SYSTEM  
1200 S PINE ISLAND RD  
PLANTATION, FL 33324 US

*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

**Officer/Director Detail :**

Title PRESIDENT & DIRECTOR

Name SPALDING, STEVEN L

Address 50 E RIVERCENTER BLVD

City-State-Zip: COVINGTON KY 41012-0391

Title SECRETARY, VICE PRESIDENT & DIRECTOR

Name ROE, MICHAEL S

Address 50 E. RIVERCENTER BLVD

City-State-Zip: COVINGTON KY 41012

Title VICE PRESIDENT, ASSISTANT SECRETARY & DIRECTOR

Name RINES, DAVID A

Address 50 E RIVERCENTER BLVD

City-State-Zip: COVINGTON KY 41012-0391

Title TREASURER, VICE PRESIDENT & ASSISTANT SECRETARY

Name FREEMAN, LYNN P

Address 50 E RIVERCENTER BLVD

City-State-Zip: COVINGTON KY 41012-0391

Title ASSISTANT TREASURER-TAX & ASSISTANT SECRETARY-TAX

Name EVANS, KAREN L

Address 3499 BLAZER PARKWAY

City-State-Zip: LEXINGTON KY 40509

Title ASSISTANT TREASURER-TAX & ASSISTANT SECRETARY-TAX

Name GREGG, SCOTT A

Address 50 E. RIVERCENTER BLVD.

City-State-Zip: COVINGTON KY 41012

Title VICE PRESIDENT-FINANCE

Name BONI, ERIC N

Address 50 E RIVERCENTER BLVD

City-State-Zip: COVINGTON KY 41012

Title ASSISTANT TREASURER-CASH CONTROL

Name MENSHOUSE, BRIAN D

Address 50 E RIVERCENTER BLVD

City-State-Zip: COVINGTON KY 41012

*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: KAREN L EVANS

ASSISTANT TREASURER- TAX 01/21/2014

Electronic Signature of Signing Officer/Director Detail

Date