2016 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

FILED Jan 27, 2016

Secretary of State

CC9777338048

Officer/Director Detail:

Title PRESIDENT & DIRECTOR Title SECRETARY, VICE PRESIDENT &

DIRECTOR

Name SPALDING, STEVEN L
Name ROE, MICHAEL S
Address 50 E RIVERCENTER BLVD

Address 50 E. RIVERCENTER BLVD City-State-Zip: COVINGTON KY 41012-0391

City-State-Zip: COVINGTON KY 41012

Title DIRECTOR

Address

Name YESUFU, ISSA O Title TREASURER, VICE PRESIDENT & ASSISTANT SECRETARY

VICE PRESIDENT-TAX

GREGG, SCOTT A

Address 50 E RIVERCENTER BLVD Name FREEMAN, LYNN P

City-State-Zip: COVINGTON KY 41012-0391 Address 50 E RIVERCENTER BLVD

City-State-Zip: COVINGTON KY 41012-0391

Title

Title ASSISTANT TREASURER-TAX &

ASSISTANT SECRETARY-TAX

3499 BLAZER PARKWAY

Name POOR, KAREN J Name

City-State-Zip: LEXINGTON KY 40509

Address 50 E. RIVERCENTER BLVD.

City-State-Zip: COVINGTON KY 41012

Title VICE PRESIDENT-FINANCE

Title ASSISTANT TREASURER-CASH

Name BONI, ERIC N CONTROL

Address 50 E RIVERCENTER BLVD Name LODHI, ASAD P

City-State-Zip: COVINGTON KY 41012 Address 50 E RIVERCENTER BLVD

City-State-Zip: COVINGTON KY 41012

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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 J POOR ASSISTANT TREASURER- 01/27/2016

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

ASSISTANT TREASURER-TAX & ASSISTANT SECRETARY-TAX Title

Name SCHMELZER, NICOLAS H 3499 BLAZER PARKWAY Address City-State-Zip: LEXINGTON KY 40509