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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # **P13669** (7)

1. Corporation Name
AMOCO CORPORATION

Principal Place of Business Mailing Address
**200 E RANDOLPH DR
MAIL CODE 2401A
CHICAGO IL 60601-7125
US** **200 E RANDOLPH DR
MAIL CODE 2401A
CHICAGO IL 60601-7125
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **03/18/1987** 3a. Date of Last Report **04/29/1994**

2. Principal Place of Business 2a. Mailing Address

21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.

22 City & State 27 City & State

23 Zip Country 28 Zip Country

24 25 29 30

4. FEI Number **36-1812780** 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 § 190.005, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301**

01 Name
02 Street Address (P.O. Box Number is Not Acceptable)
03
04 City **FL** 05 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 State of corporation)

Printed Name of registered agent and State of corporation

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **V**
NAME **MITCHELL, D.R.**
STREET ADDRESS **200 E RANDOLPH DR**
CITY ST ZIP **CHICAGO IL**

11 TITLE Change Addition
12 NAME
13 STREET ADDRESS
14 CITY ST ZIP

TITLE **V**
NAME **SPINDLER, G.S.**
STREET ADDRESS **200 E RANDOLPH DR**
CITY ST ZIP **CHICAGO IL**

21 TITLE **SR. Vice President** Change Addition
22 NAME
23 STREET ADDRESS
24 CITY ST ZIP

TITLE **V**
NAME **CARR, R.C.**
STREET ADDRESS **200 E RANDOLPH DR**
CITY ST ZIP **CHICAGO IL**

31 TITLE **Vice President** Change Addition
32 NAME **W. R. Hutchinson**
33 STREET ADDRESS **200 E. Randolph Drive**
34 CITY ST ZIP **Chicago, IL 60601**

TITLE **AS**
NAME **RAMOS, E.J.**
STREET ADDRESS **200 E RANDOLPH DR**
CITY ST ZIP **CHICAGO IL**

41 TITLE **Assistant Corporate Secretary** Change Addition
42 NAME
43 STREET ADDRESS
44 CITY ST ZIP

TITLE **S**
NAME **BRANDIN, P.A.**
STREET ADDRESS **200 E RANDOLPH DR**
CITY ST ZIP **CHICAGO IL**

51 TITLE **Corporate Secretary** Change Addition
52 NAME
53 STREET ADDRESS
54 CITY ST ZIP

TITLE **T**
NAME **WILLIAMS, M.C.**
STREET ADDRESS **200 E RANDOLPH DR**
CITY ST ZIP **CHICAGO IL**

61 TITLE Change Addition
62 NAME
63 STREET ADDRESS
64 CITY ST ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119 (7)(C)(iv), 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 such certificate had been 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 of this report, or on an attachment with an address.

SIGNATURE:

Mitchell D.R. Mitchell
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

TREASURER

312-856-6756
Telephone #