

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 10, 2005 08:00 AM
Secretary of State

DOCUMENT # F02000000282 1. Entity Name SUN PIPE LINE COMPANY	
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Principal Place of Business 1801 MARKET STREET PHILADELPHIA, PA 19103	Mailing Address 1801 MARKET STREET PHILADELPHIA, PA 19103
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DO NOT WRITE IN THIS SPACE

5. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324	DO NOT WRITE IN THIS SPACE
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when re-registering) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P FRETZ, DEBORAH M 1801 MARKET STREET PHILADELPHIA, PA 19103
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V JUSTIN, DAVID A 1801 MARKET STREET PHILADELPHIA, PA 19103
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S GERNER, ELRIC C 1801 MARKET STREET PHILADELPHIA, PA 19103
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD MULHOLLAND, PAUL A 1801 MARKET STREET PHILADELPHIA, PA 19103
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BROKER, PAUL S 1801 MARKET STREET PHILADELPHIA, PA 19103
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS MOORE, MARTHA L 1801 MARKET STREET PHILADELPHIA, PA 19103

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**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Etric C. Gerner 1/28/05 (215) 977-6648
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ETRIC C. GERNER, SECRETARY