
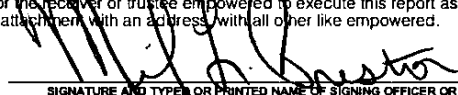


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 25, 2006 8:00 am
Secretary of State

07-25-2006 90026 041 ***150.00

DOCUMENT # F02000000282			
1. Entity Name SUN PIPE LINE COMPANY			
Principal Place of Business 1801 MARKET STREET PHILADELPHIA, PA 19103		Mailing Address 1801 MARKET STREET PHILADELPHIA, PA 19103	
2. Principal Place of Business 1735 Market Street Suite Apt. #, etc. LL		3. Mailing Address 1735 Market Street Suite Apt. #, etc. LL	
City & State Philadelphia, PA		City & State Philadelphia, PA	
Zip 19103		Country Philadelphia	
4. FEI Number 23-3102653		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324		7. Name and Address of New Registered Agent	
Name		Street Address (P.O. Box Number is Not Acceptable)	
City		FL Zip Code	
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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
FILE NOW!!! FEE IS \$150.00 Due by September 6, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P FRETZ, DEBORAH M 1801 MARKET STREET PHILADELPHIA, PA 19103 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1735 Market Street
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V JUSTIN, DAVID A 1801 MARKET STREET PHILADELPHIA, PA 19103 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1735 Market Street
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S GERNER, ELRIC C 1801 MARKET STREET PHILADELPHIA, PA 19103 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Secretary Michael E. Preston 1735 Market St. Philadelphia, PA 19103
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD MULHOLLAND, PAUL A 1801 MARKET STREET PHILADELPHIA, PA 19103 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1735 Market Street
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BROKER, PAUL S 1801 MARKET STREET PHILADELPHIA, PA 19103 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1735 Market Street
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS MOORE, MARTHA L 1801 MARKET STREET PHILADELPHIA, PA 19103 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1735 Market Street
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental reports 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: 		Date: 7-16-06 Daytime Phone #: 215-977-6648	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date	