


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 18, 2005 08:00 AM
Secretary of State

DOCUMENT # F02000005414 1. Entity Name FOREMOST PIPELINE CONSTRUCTION CO., INC.	
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Principal Place of Business PO BOX 1087 EUNICE, LA 70535	Mailing Address PO BOX 1087 EUNICE, LA 70535
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DO NOT WRITE IN THIS SPACE



01102005 No Chg-P CR2E034 (10/03)

4. FEI Number 52-0472576	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

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

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IN THIS SPACE**

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 reinstating) 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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO SOILEAU, JOHN E 110 RUE NORMANDIE EUNICE, LA 70535
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P O'ROKE, MARK 427 RUE NORMANDIE EUNICE, LA 70535
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MEIER, CRAIG 206 WESTFIELD LAFAYETTE, LA 70503
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP POCHE, JEFFREY 416 SHELLY LAFAYETTE, LA 70503
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SOILEAU, GERALDINE 110 RUE NORMANDIE EUNICE, LA 70535
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SOILEAU, ANDRE 110 RUE NORMANDIE EUNICE, LA 70535

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IN THIS SPACE**

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01/19/05-80071-014 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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: Mark W. O'Rohe **MARK W. O'ROKE** 1/13/05 337-546-0241
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #