2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04120

Entity Name: CHARLOTTE PIPE AND FOUNDRY COMPANY

FILED May 21, 2009 Secretary of State

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Current P	rincipal Place	of Business:	New Prince	New Principal Place of Business:		
P.O. BOX	DOLPH ROAD 35430 TTE, NC 28235			2109 RANDOLPH ROAD CHARLOTTE, NC 28207		
Current N	lailing Addres	s:	New Maili	New Mailing Address:		
P.O. BOX	DOLPH ROAD 35430 FTE, NC 28235					
FEI Number	: 56-0174030	FEI Number Applied For ()	FEI Number Not App	licable ()	Certificate of Status Desired ()	
Name and	d Address of C	urrent Registered Agent:	Name and	Address of	New Registered Agent:	
1200 S. PI	ORATION SYS NE ISLAND RO ION, FL 33324	DAD				
	e named entity s e of Florida.	submits this statement for the p	ourpose of changing i	its registered	office or registered agent, or both,	
SIGNATUI	RE:					
	Electron	ic Signature of Registered Age	ent		Date	
Election Ca	mpaign Financing	g Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	V () HUTAFF III, WII 2109 RANDOLF CHARLOTTE, N	PH ROAD	Title: Name: Address: City-St-Zip:	SVP (2 HUTAFF, III, V 2109 RANDOI CHARLOTTE,	LPH ROAD	
Title: Name: Address: City-St-Zip:	CD () DOWD, RODDI 2109 RANDOLF CHARLOTTE, N	PH ROAD	Title: Name: Address: City-St-Zip:	DOWD, JR., F 2109 RANDOI	LPH ROAD	
Title: Name: Address: City-St-Zip:	ST () DOWNING, DE 2109 RANDOLF CHARLOTTE, N	PH ROAD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V () COBB, CHARLI 2109 RANDOLF CHARLOTTE, N	PH ROAD	Title: Name: Address: City-St-Zip:	SVP (2 SALTER, LEO 2109 RANDOI CHARLOTTE,	LPH ROAD	
Title: Name: Address: City-St-Zip:	VD () DOWD IV, FRA 2109 RANDOLF CHARLOTTE, N	PH ROAD	Title: Name: Address: City-St-Zip:	VD (X DOWD, IV, FF 2109 RANDOI CHARLOTTE,	LPH ROAD	
Title: Name: Address: City-St-Zip:	VP () FAISON, CAME 2109 RANDOLF CHARLOTTE, N	PH ROAD	Title: Name: Address: City-St-Zip:	SVP (X FAISON, CAM 2109 RANDOI CHARLOTTE,	LPH ROAD	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: LOIS H WARREN SVP 05/21/2009