2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 15, 2005 8:00 am Secretary of State

1. Entity Nam	MENT # 816340 ON PIPE LINE COMPANY					04-15-2003	5 90108 038 **:	*150.00	
•		Mailing Address ATTN: USI & F TAX RM 4135							
HOUSTON, TX 77056 US		539 SOUTH MAIN ST FINDLAY, OH 45840 US			20034563				
2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.		0-	4072005	Chg-P	CR2E034 (10/	03)	
City & State		City & State		4.	FEI Numbe 34-6522			Applied For Not Applicable	
Zip	Country	Zip	Country	5.	Certificate of	of Status Desired	☐ \$8.75 Fee Red	Additional quired	
Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent					
CT CORPORATION SYSTEM				Name					
1200 S. PI	NE ISLAND ROAD ON, FL 33324	Street Address (ddress (P.O.	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									
FILE NOWIII FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees									
10.	OFFICERS AND	DIRECTORS ·	11,	A	DDITIONS/	CHANGES TO OF	FFICERS AND DIREC	TORS IN 11	
TITLE	VP	☐ Delete	TITLE				☐ Cha		
NAME	PURCELL, N.R.		NAME						
STREET ADDRESS CITY-ST-ZIP	539 SOUTH MAIN ST		STREET ADDRESS CITY-ST-ZIP						
	FINDLAY, OH 45840	₹Vn.c.					□ Cho	inge 🔲 Addition	
TITLE NAME	BLISS, M A	Delete	TITLE NAME	/	,		Cha	inge 🗀 yaardon	
STREET ADDRESS CITY-ST-ZIP	5555 SAN FELIPE RD HOUSTON, TX 77056		STREET ADDRESS CITY-ST-ZIP	V	aca Fisa	ncy			
TITLE	PD	▼ Delete	TITLE	PD			⊊ Cha	inge 🔲 Addition	
NAME	EVANS, J.A.		NAME	n.J.	Fisa	her-		77056	
STREET ADDRESS CITY-ST-ZIP	539 SOUTH MAIN ST FINDLAY, OH 45840		STREET ADDRESS CITY-ST-ZIP	5555	5 5 an	Felipe	Houston, 1	K.	
TITLE	AS	☐ Delete	TITLE				☐ Cha	inge 🔲 Addition	
NAME STREET ADDRESS	HALEY, J R 539 S. MAIN ST		NAME STREET ADDRESS						
CITY-ST-ZIP	FINDLAY, OH 45840		CITY-ST-ZIP						
TITLE		☐ Delete	TITLE				☐ Cha	ange 🔲 Addition	
NAME			NAME				_		
STREET ADDRESS CITY-ST-ZIP		<u> </u>	STREET ADDRESS CITY-ST-ZIP				· · ·	<u></u>	
TITLE .		☐ Delete	TITLE				Ć Cha	ange 🔲 Addition	
NAME STREET ADDRESS			NAME STREET ADDRESS						
CITY-ST-ZIP			CITY-ST-ZIP						

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). 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:

All Walls 1. 3015