

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 816942

FILED
Mar 29, 2007
Secretary of State

Entity Name: MCJUNKIN CORPORATION

Current Principal Place of Business:

835 HILLCREST DR. E.
CHARLESTON, WV 25311

New Principal Place of Business:

Current Mailing Address:

835 HILLCREST DR. E.
CHARLESTON, WV 25311

New Mailing Address:

FEI Number: 55-0229830

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
C/O C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D (X) Delete
Name: WEHRLE, H.B. JR.,
Address: 835 HILLCREST DR
City-St-Zip: CHARLESTON WV,

Title: VT (X) Delete
Name: WEHRLE, M.H.,
Address: 835 HILLCREST DR.
City-St-Zip: CHARLESTON, WV.,

Title: D () Delete
Name: ISAACS, RUSSELL L
Address: STE 1523 300 SUMMERS
City-St-Zip: CHARLESTON, WV 25301

Title: AS () Delete
Name: BURNS, JOAN C
Address: 835 HILLCREST DR
City-St-Zip: CHARLESTON, WV

Title: SD () Delete
Name: GRAFF JR., F.T.,
Address: 835 HILLCREST DR
City-St-Zip: CHARLESTON, WV

Title: P () Delete
Name: WEHRLE, H. B. III,
Address: 1620 LOUDEN HGTS ROAD
City-St-Zip: CHARLESTON, WV.,

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: CFO (X) Change () Addition
Name: UNDERHILL, J F
Address: 835 HILLCREST DR
City-St-Zip: CHARLESTON, WV 25322

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: JOAN C. BURNS

AS

03/29/2007

Electronic Signature of Signing Officer or Director

Date