## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F04000003046

Entity Name: AMEC PIPELINE PROFESSIONALS, INC.

FILED Apr 04, 2005 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
2020 WINSTON PARK DRIVE, SUITE 700 OAKVILLE, ONTARIO, CANADA L6H 6X7, XX				2020 WINSTON PARK DRIVE SUITE 700 OAKVILLE, ON L6H 6X7 CA			
Current Mailing Address:				New Mailing Address:			
2020 WINSTON PARK DRIVE, SUITE 700 OAKVILLE, ONTARIO, CANADA L6H 6X7, XX				2020 WINSTON PARK DRIVE SUITE 700 OAKVILLE, ON L6H 6X7 CA			
FEI Number:	74-2918594	FEI Number Applied For ( )	FEI Nun	nber Not Appli	cable ( )	Certificate of Status Desi	red ( )
Name and	Address of Cu	ırrent Registered Agent:		Name and	Address of N	lew Registered Agent:	:
1200 SOUT PLANTATI			rpose o	f changing it	s registered o	ffice or registered agent	t, or both,
SIGNATUR	RE:						
Electronic Signature of Registered Agent						Date	
Election Can	npaign Financing	Trust Fund Contribution ( ).					
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	PEARS, DOUGL	E, 53016 HWY 60, ACHESON		Title: Name: Address: City-St-Zip:	PEARS, DOUG	VE, 53016 HWY 60	
Title: Name: Address: City-St-Zip:	S () I SCHIFFER, VIVII 333 CLAY STRE HOUSTON, TX 7	ET, SUITE 3300		Title: Name: Address: City-St-Zip:	( )	Change ( ) Addition	
Title: Name: Address: City-St-Zip:	LING, GRANT	Delete PARK DRIVE, SUITE 700 L6H 6X7,		Title: Name: Address: City-St-Zip:	LING, GRANT	Change ( ) Addition TREET NW, SUITE 1000 DC 20005 US	
Title: Name: Address: City-St-Zip:	PATTERSON, LA	HOUSTON PARKWAY SOUTH #100	0	Title: Name: Address: City-St-Zip:	PATTERSON, L	REEWAY, SUITE 100	
Title: Name: Address: City-St-Zip:	D () I MCCLUSKIE, JA 4435 E. HOLMES MESA, AZ 8520	S AVENUE		Title: Name: Address: City-St-Zip:	D (X) MCCLUSKIE, J. 4435 E. HOLME MESA, AZ 852	ES AVENUE	
Title: Name: Address: City-St-Zip:	STARRATT, JOH 900 MONENCO I	Delete N PLACE, 801-6 AVENUE SW NNADA T2P 3W3,		Title: Name: Address: City-St-Zip:	GERRISH, GRE	PARK DRIVE, SUITE 700	

I hereby certify that the information supplied with this filing does not qualify for the 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 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: GREGORY R. GERRISH ACS 04/04/2005