

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000005809

FILED
Aug 21, 2006
Secretary of State

Entity Name: VANGUARD PIPING SYSTEMS, INC.

Current Principal Place of Business:

901 N. VANGUARD ST.
MCPHERSON, KS 674603112

New Principal Place of Business:

Current Mailing Address:

901 N. VANGUARD ST.
MCPHERSON, KS 674603112

New Mailing Address:

301 N. MAIN ST
SUITE 900
WICHITA, KS 67202

FEI Number: 48-1169300

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RUMP, JUDY
118 OREGON AVE
ST. CLOUD, FL 34769 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FRASER, JOHN
Address: 133 W. NORTHVIEW
City-St-Zip: MCPHERSON, KS 67460

Title: S () Delete
Name: SWINEHART, DINAH L
Address: 43 NEWPOINT RD.
City-St-Zip: BEAUFORT, SC 29906

Title: T () Delete
Name: SPEARMAN, NATHAN
Address: 405 FOXBOROUGH
City-St-Zip: MCPHERSON, KS 67460

Title: D (X) Delete
Name: SWINEHART, W. KEITH SR.
Address: 15 OCEAN POINT
City-St-Zip: HILTON HEAD, SC 29928

Title: D (X) Delete
Name: LEGGITT, DON C SR.
Address: 603 ADMIRAL BENBOW LANE
City-St-Zip: MCQUEEN, TX 78123

Title: D (X) Delete
Name: LEGGITT, DON JR.
Address: 22285 WATERFORD DRIVE
City-St-Zip: NEW BRAUNFELLS, TX

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: CEO (X) Change () Addition
Name: SCHMIRER, DAN
Address: 242 N. MEAD #5B
City-St-Zip: WICHITA, KS 67202

Title: S/T (X) Change () Addition
Name: SPEARMAN, NATHAN
Address: 405 FOXBOROUGH
City-St-Zip: MCPHERSON, KS 67460

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: MIKE JOHNSON

AMGR

08/21/2006

Electronic Signature of Signing Officer or Director

Date