

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000001109

FILED
Jan 05, 2009
Secretary of State

Entity Name: ROCKFORD PIPELINE CORPORATION

Current Principal Place of Business:

22845 NW BENNETT ST., STE 150
HILLSBORO, OR 97124

New Principal Place of Business:

Current Mailing Address:

22845 NW BENNETT ST., STE 150
HILLSBORO, OR 97124

New Mailing Address:

FEI Number: 93-1021510 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: C () Delete
Name: BELZBERG, SAM
Address: 1075 W. GEORGIA ST., STE 2600
City-St-Zip: VANCOUVER, BC CANADA V6E3C9,

Title: VC () Delete
Name: WALLACE, CHRIS
Address: 1075 W. GEORGIA ST., STE 2600
City-St-Zip: VANCOUVER, BC CANADA V6E3C9,

Title: D () Delete
Name: WELCH, FRANK
Address: 22845 NW BENNETT ST., STE 150
City-St-Zip: HILLSBORO, OR 97124

Title: D () Delete
Name: STOPPLER, LORNE
Address: 9146 E. RUSTY SPUR PLACE
City-St-Zip: SCOTTSDALE, AZ 85255

Title: P () Delete
Name: WELCH, FRANK O
Address: 18201 NE BALD PEAK RD
City-St-Zip: NEWBERG, OR 97132

Title: ST () Delete
Name: ROCKFORD, PATRICK T
Address: 588 NE GOLDIE DR
City-St-Zip: HILLSBORO, OR 97124

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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 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: PATRICK T ROCKFORD

ST

01/05/2009

Electronic Signature of Signing Officer or Director

_____ Date