

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F92000000486

FILED
Jan 23, 2009
Secretary of State

Entity Name: MIDWESTERN PIPELINE SERVICES, INC.

Current Principal Place of Business:

160 KLAMATH CT
AMERICAN CANYON, CA 94503 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 330356
SAN FRANCISCO, CA 94133 US

New Mailing Address:

FEI Number: 73-1409478 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
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: P () Delete
Name: HARRISON, MICHAEL T
Address: 160 KLAMATH CT.
City-St-Zip: AMERICAN CANYON, CA 94503

Title: V () Delete
Name: POYAS, JOHN L
Address: 1815 E. 32ND ST
City-St-Zip: TULSA, OK 74105

Title: V () Delete
Name: WILHITE, MICHAEL T.
Address: 160 KLAMATH CT
City-St-Zip: AMERICAN CANYON, CA 94503

Title: V () Delete
Name: HARRISON, CHRIS M
Address: PO BOX 330356
City-St-Zip: SAN FRANCISCO, CA 94133

Title: VP () Delete
Name: BRADY, STANLEY J
Address: 400 OAK PARK CIRCLE
City-St-Zip: RUSTON, LA 71270

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HARRISON, T M
Address: 160 KLAMATH CT.
City-St-Zip: AMERICAN CANYON, CA 94503

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

Title: V (X) Change () Addition
Name: WILHITE, MICHAEL T
Address: 160 KLAMATH CT
City-St-Zip: AMERICAN CANYON, CA 94503

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: CHRIS M. HARRISON

VP

01/23/2009

Electronic Signature of Signing Officer or Director

Date