2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

F92000000486 **DOCUMENT#**

1. Entity Name

MIDWESTERN PIPELINE SERVICES, INC.

Principal Pla 1025 KAISEF NAPA CA 94		Mailing Address 1025 KAISER ROAD NAPA CA 94558								
US		US]	 -	L ib na ho un da nn aige i	18 (18 6 (1) (2 6)			
2. Principal Place of Business		10 Marting Angles								
2. Tillicipal Flace of business		3. Mailing Address						10110 0111 1001		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES						
City & State		City & State			4. FEI Number 73-1409478			pplied For		
Zip	Country	Zip	Coun	try	5. Certificate of State	us Desired	\$9.75	ditional		
	6. Name and Address of Curren	t Registered Agent		ح جو عهد سد.	.⊥ -–7.∞Name and Addre	ss of New Regist				
CTCOD	PORATION SYSTEM			Name .						
	UTH PINE ISLAND ROAD		Street Addre			(P.O. Box Number is Not Acceptable)				
	10N FL 33324						·			
				City			— 1 7:- 0 - 2			
• The above	o normal autitus, built Main atau			,	<u>.</u>		FL Zip Cod			
the obliga	e named entity submits this statement fations of registered agent.	or the purpose of changing	g its registere	ed office or register	red agent, or both, in the	State of Florida.	I am familiar with,	and accept		
SIGNATURE	Signature, typed or printed name of registered agen	t and title if applicable.	NOTE: Registered	d Agent signature required	t when reinstating)		DATE	·		
· I	FILE NOW!!! FEE IS \$150.00		-		, , , , , , , , , , , , , , , , , , ,	·				
- Afte	er May 1, 2003 Fee will be \$550.00 k Payable to Florida Department o					ampaign Financin I Contribution.	- - 40.0	0 May Be I to Fees		
10.	OFFICERS AND	DIRECTORS	11.		ADDITIONS/CHANG	SES TO OFFICERS	AND DIRECTORS	S IN 11		
TITLE NAME	P Harrison, T Michael	☐ Delete	TITLE		· · ·		☐ Change	☐ Addition		
STREET ADDRESS	1025 KAISER ROAD		NAME STREE	ET ADDRESS						
CITY-ST-ZIP	NAPA CA 94558			ST-ZIP						
IITLE	V POVAC JOHN J	☐ Delete	TITLE				☐ Change	☐ Addition		
NAME STREET ADDRESS	POYAS, JOHN L 1215 E. 33RD ST.		NAME	T ADDRESS			_			
CITY-ST-ZIP	TULSA OK 74105			ST-ZIP						
UTLE	V	☐ Delete	TITLE	10\$2 VH 2 1	Section of	*	☐ Change	Addition		
IAME STREET ADDRESS	WILHITE, MICHAEL T. 1025 KAISER ROAD		NAME	T ADDRESS						
ITY-ST-ZIP	NAPA CA 94558			ST-ZIP						
ITLE	٧	☐ Delete	TITLE				☐ Change	Addition		
TREET ADDRESS	HARRISON, CHRIS M 1025 KAISER ROAD		NAME	T ADDRESS				}		
ITY-ST-ZIP	NAPA CA 94558			T AUUHESS ST-ZIP						
ITLE	VPA	☐ Delete	TITLE	7			Change	Addition		
AME	PEAT, JEANNE		NAME							
treet address Ity-st-zip	1025 Kaiser Road Napa ca 94558			T ADDRESS ST-ZIP						
ITLE		☐ Delete	TITLE				Change	☐ Addition		
AME		12 0000	NAME					Addition		

FILED Feb 06, 2003 8:00 am Secretary of State 02-06-2003 90083 037 ***150.00

	T2		· · · · · · · · · · · · · · · · · · ·	ADDITIONS/	CHANGES TO U	LLICEHO VIVE	DIRECTORS	11N 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HARRISON, T MICHAEL 1025 KAISER ROAD NAPA CA 94558	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V DOYAS, JOHN L 1215 E. 33RD ST. TULSA OK 74105	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V WILHITE, MICHAEL T. 1025 KAISER ROAD NAPA CA 94558	Delete	NAME STREET ADDRESS CITY-ST-ZIP	and the second		. <u> </u>	Change	Addition
STREET ADDRESS	V D HARRISON, CHRIS M 1025 KAISER ROAD NAPA CA 94558	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		. •		☐ Change	Addition
STREET ADDRESS	VPA PEAT, JEANNE 1025 KAISER ROAD NAPA CA 94558	ļ	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	□ D ₁		TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	☐ Addition

I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: