NOW: FILING FEE AFTER MAY 1 [illegible]

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAY -1 AM 10:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F94000016666

Corporation Name

ENRON PIPELINE COMPANY

200001482112
-05/10/95--01015--016
****200.00 ****200.00

DO NOT WRITE IN THIS SPACE

Principal Place of Business
C/O PEGGY B. MENCHACA
P.O. BOX 1188
HOUSTON, TX 77251-1188

Mailing Address
C/O PEGGY B. MENCHACA
P.O. BOX 1188
HOUSTON, TX 77251-1188

1. Date Incorporated or Qualified: 12/29/1994

1a. Date of Last Report: INITIAL RETURN

2. Principal Place of Business
21

2a. Mailing Address
26

FEI Number: 76-0323922 ☐ Applied For ☐ Not Applicable

2b. Apt. #, etc.
22

Suite, Apt. #, etc.
27

3. Certificate of Status Desired ☐ $8.75 Additional Fee Required

3a. City & State
23

City & State
28

4. ☐ $5.00 May Be Added to Fees

County
24 25

Zip 29 County 30

5. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324

7. Name and Address of New Registered Agent

81 Name

82 Address (P.O. Box Number is Not Acceptable)

83

84 City FL 85 Zip Code

Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of Registered Agent and Title if applicable (NOTE: Registered Agent signature required when reinstating)

OFFICERS AND DIRECTORS

TITLE	COB/D	11 TITLE	☐ Change ☐ Addition
NAME	HORTON, STANLEY C.	12 NAME	
STREET ADDRESS	1400 SMITH STREET	13 STREET ADDRESS	
CITY-ST-ZIP	HOUSTON, TX 77002	14 CITY-ST-ZIP	
TITLE	VP/D	21 TITLE	☐ Change ☐ Addition
NAME	DERRICK, JR., JAMES V.	22 NAME	
STREET ADDRESS	1400 SMITH STREET	23 STREET ADDRESS	
CITY-ST-ZIP	HOUSTON, TX 77002	24 CITY-ST-ZIP	
TITLE	VP	31 TITLE	☐ Change ☐ Addition
NAME	PARKS, E.G.	32 NAME	
STREET ADDRESS	1400 SMITH STREET	33 STREET ADDRESS	
CITY-ST-ZIP	HOUSTON, TX 77002	34 CITY-ST-ZIP	
TITLE	VP	41 TITLE	☐ Change ☐ Addition
NAME	TOMPKINS, JACK I.	42 NAME	
STREET ADDRESS	1400 SMITH STREET	43 STREET ADDRESS	
CITY-ST-ZIP	HOUSTON, TX 77002	44 CITY-ST-ZIP	
TITLE	VP	51 TITLE	☐ Change ☐ Addition
NAME	HERMANN, ROBERT J.	52 NAME	
STREET ADDRESS	1400 SMITH STREET	53 STREET ADDRESS	
CITY-ST-ZIP	HOUSTON, TX 77002	54 CITY-ST-ZIP	
TITLE	VP	61 TITLE	☐ Change ☐ Addition
NAME	HUNEKE, KURT S.	62 NAME	
STREET ADDRESS	1400 SMITH STREET	63 STREET ADDRESS	
CITY-ST-ZIP	HOUSTON, TX 77002	64 CITY-ST-ZIP	

I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 the report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or on an attachment with an address.

SIGNATURE: R.A.J. Hermann 4/21/95 (713) 853-5955
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

ROBERT J. HERMANN VICE PRESIDENT, TAX