· FILE NOW: FILING FEE AFTER MAY 1ST IS $550.00

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE **Katherine Harris** Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **F96000001769**

1. Corporation Name

NORTHERN PIPELINE CONSTRUCTION CO.

Principal Place of Business	Mailing Address
5241 SPRING MOUNTAIN RD LAS VEGAS NV 89102	1 W DEER VALLEY ROAD STE #101 PHOENIX AZ 85027 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed
04/09/1996

4. FEI Number
88-6003998 | Applied For | Not Applicable

5. Certifcate of Status Desired ☐ — **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ — **$5.00** May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business [21]	2a. Mailing Address [26]
Suite, Apt. #, etc. [22]	Suite, Apt. #, etc. [27]
City & State [23]	City & State [28]
Zip [24] Country [25]	Zip [29] Country [30]

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City FL	85	Zip Code

11. 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 _____

Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)   DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	C	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	MAFFIE, MICHAEL O		1.2 NAME	
STREET ADDRESS	5241 SPRING MOUNTAIN ROAD		1.3 STREET ADDRESS	
CITY-ST-ZIP	LAS VEGAS NV		1.4 CITY-ST-ZIP	
TITLE	PCE	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	KEMPER, MICHAEL J		2.2 NAME	
STREET ADDRESS	ONE W DEER VALLEY ROAD, #101		2.3 STREET ADDRESS	
CITY-ST-ZIP	PHOENIX AZ		2.4 CITY-ST-ZIP	
TITLE	VP	☒ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	KING, ROBERT M		3.2 NAME	
STREET ADDRESS	ONE W DEER VALLEY ROAD, #101		3.3 STREET ADDRESS	
CITY-ST-ZIP	PHOENIX AZ		3.4 CITY-ST-ZIP	
TITLE	TS	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	MCHENRY, ROCK L		4.2 NAME	
STREET ADDRESS	ONE W DEER VALLEY ROAD, #101		4.3 STREET ADDRESS	
CITY-ST-ZIP	PHOENIX AZ 85027		4.4 CITY-ST-ZIP	
TITLE	VP	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME	ROBERTS, KENNETH E		5.2 NAME	
STREET ADDRESS	ROUTE 64 50W363		5.3 STREET ADDRESS	
CITY-ST-ZIP	MAPLE PARK IL		5.4 CITY-ST-ZIP	
TITLE	VP	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME	WAMBACH, MARK S		6.2 NAME	
STREET ADDRESS	ONE W DEER VALLEY RD #101		6.3 STREET ADDRESS	
CITY-ST-ZIP	PHOENIX AZ 85027		6.4 CITY-ST-ZIP	

14. 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 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 this 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, with all other like empowered.

SIGNATURE: _Rock L. McHenry_ Rock L. McHenry 5/21/99 (623) 582-1235

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #

CR2E034 (11/98)