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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9700001394 (2)

KAMPHUIS PIPELINE CO.

FILED Jan 26 1998 8:00am Secretary of State



| Principal Place of Business Mailing Address | | | | | | | | | | JQ 1 111 19 7 9 4 | (II | |
|---|-----------------------------|-----------------|-----------------------|--------------------|--------------|---|----------------------------------|---|------------|--|---------------|--|
| 6115 28TH STREET SE. STE. 201 6115 28TH STREET SE. STE | | | | | | | | | | | | |
| GRAND RAPII | DS MI 49546 | GRANI | GRAND RAPIDS MI 49546 | | | | DO NOT WRITE IN THIS SPACE | | | | | |
| | | | | | | | | 3. Date Incorporated or Qualified | I INIS SPA | CE | | |
| | | | | | | | | 03/17/1997 | | | | |
| 2. Principal P | lace of Busines | 2a. Mai | 2a. Mailing Address | | | | 4. FEI Number | | Ar | oplied For | | |
| 21 | | 26 | 26 | | | | 38-2651238 | Not Applicable | | | | |
| Suite, Apt. | #, etc. | Suit | Suite, Apt. #, etc. | | | | 5. Certificate of Status Desired | _ | 8.75 | Additional | | |
| 22 | | 27 | | | | | J. Certificate of Status Desired | | Fee Re | equired | | |
| City & State | .0 | City | Cily & State | | | | 6. Election Campaign Financing | | | May Be | | |
| 23 | | | 28 | | | | | | <u> </u> | | to Fees | |
| Zip | <u> </u> | Country | — <u> </u> | Zip Country | | | | 8. This corporation owes or has paid the current year Intangible | | | | |
| 24 | 25 | | [29] | | | | | Personal Property Tax due June 30. Yes No 10, Name and Address of New Registered Agent | | | | |
| 9. Name and Address of Current Registered Agent | | | | | | | me | TU, Name and Address of New Regis | stered Age | <u> </u> | | |
| | MELHAIR, BRI | | CTE OOA | | " | 1 Na | me | | | | | |
| | 1 N. MAGNOL KLANDO FL 32 | SIE. 304 | 4 | | 2 Str | eet Address (P.O. Box Number is Not Acceptable) | | | | | | |
| | | | | | 8 | 3 | | | | ···· | | |
| | | | | | 8 | 4 Cit | у | | FL | 5 Zip | Code | |
| 11 Durement | to the provision | e of Sections 6 | 07 0502 and 607 18 | O8 Florida Statut | as the abo | We-par | ned corpo | oration submits this statement for the nur | | ancina i | te registered | |
| 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, | Signature, types or t | RS AND DIRECTOR | | | | ature require | ADDITIONS/CHANGES TO OFFICER | | RECTOR | RS IN 12 | | |
| TITLE | PD | O, T TOE | TIO TIND DIVIDED FOR | DELETE | 1.1 TITLE | | | 1,001110110,0111111020 10 011102 | | Change | Addition | |
| NAME | KAMPHUIS | , DANIEL J | | | 1.2 NAM | | | | | Ť | _ | |
| STREET ADDRESS | | STREET SE | , STE. 201 | | | - et addri | -SS | | | | | |
| CITY-ST-ZIP | GRAND RA | VPIOS MI 495 | 46 | | 1.4 CITY | | | | | | | |
| TITLE | V | | | ☐ DELETE | 2.1 TITLE | | | | | Change | Addition | |
| NAME | DEJONGE, | RUSSELL H | | | 2 2 NAM | E | | | | | | |
| STREET ADDRESS | 6115 28TH | STREET SE | , STE. 201 | | 2 3 STREET A | | SS | | | | | |
| CITY-ST-ZIP | GRAND RA | VPIDS MI 495 | 46 | | 2. 4 CITY | | Ì | | | | | |
| TITLE | 8 | | | DELETE | 3.1 TITLE | | | | | Change | Addition | |
| NAME | | , DANIEL J | | | 3.2 NAM | E | | | | | | |
| STREET ADDRESS | | I STREET SE | | 3.3 STREET ADDRESS | | | ESS | | | | | |
| CITY-ST-ZIP | GRAND RA | APIDS MI 495 | 46 | | 3.4. CITY | - S1 - ZIP | \perp | | | | | |
| TITLE | | | | DELETE | 4.1 TITLE | | | | | Change | Addition | |
| NAME | SMALLEY, | | | | 4. 2 NAM | IE | | | | | | |
| STREET ADDRESS | | i street se | | 43 STREET A | | ET ADDRI | SS | | | | | |
| CITY-ST-ZIP | GRAND RA | VPIDS MI 495 | 46 | | 4.4 CITY | -ST-ZIP | | | | | | |
| TITLE | | _ | | ☐ DELETÉ | 5 1 TITLE | | | | | Change | Addition | |
| NAME | | | | | 52 NAM | E | | | | | | |
| STREET ADDRESS | | | | | 5 3 STRE | ET ADDRI | SS | | | | | |
| CITY-ST-ZIP | | | | | 54 CITY | -\$T-ZIP | | | | | | |
| TITLE | | | | ☐ DELETE | 61 TITLE | | | | | Change | Addition | |
| NAME | | | | | 6.2 NAM | E | | | | | ļ | |
| STREET ADDRESS | | | | | 63 STRE | et addri | SS | | | | | |
| CITY-ST-ZIP | | | | | 6.4 DITY | -ST-ZIP | | | | | | |

14. Thereby 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 synumic 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 of instee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 11 in changed, or on an attachment with an address.

1/13/98

616 942-9166