2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # M04000001175

1. Entity Name IN-PIPE TECHNOLOGY COMPANY, L.L.C.

FILED Feb 27, 2006 08:00 AM Secretary of State

Principal Place of Business

100 BRIDGE STREET WHEATON, IL 60187 Malling Address

100 BRIDGE STREET WHEATON, IL 60187



01242006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 36-4314220 Applied For Not Applicat

5. Certificate of Status Desired

\$5.00 Additional Fee Required

5. Name and Address of Current Registered Agent

NRAI SERVICES, INC. 2731 EXECUTIVE PARK DRIVE SUITE 4 WESTON, FL 33331

DO NOT WRITE IN THIS SPACE

WEGTON, TE 0000 T				
8. The above the obligat	named entity submits this statement for the purpose of charitions of registered agent.	ging its registered office or registered agent, or b	oth, in the State of Florida. I am familiar with, and accept	
SIGNATURE_	Signature, typed or printed name of registered eigent and title # applicable.			
	Signature, typed or printed name of registered agent and title it applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE	
F) D	iling Fee is \$50.00 ue by May 1, 2006			
9.	MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	MGRM WILLIAMSON, DANIEL R JR 100 BRIDGE STREET WHEATON, IL 60187		### <u>##################################</u>	
NAME STREET ADDRESS CITY-ST-ZIP			63/6 3/0 6- 30 079-025 55.00	
name Street address City-St-Zip			NOT WRITE	
TITLE MAME STREET ADDRESS GITY-ST-ZIP		IN	IN THIS SPACE	
7/7LE NAME SIBEET ADDRESS CITY-ST-ZIP				
TITLE NAME				

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 118, Florida Statutes. I further certify that the informatic indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath, that 7 am a managing member or manager of it limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE ING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

STREET ACCRESS CITY-ST-ZIP

Daniel R. Williamson dr.