2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # M05000003050

1. Entity Name
TRANS-UNION PIPELINE LLC



Principal Place of Business

100 S. ASHLEY DRIVE

STE 1400 TAMPA, FL 33602 Mailing Address

100 S. ASHLEY DRIVE STE 1400 TAMPA, FL 33602



OCH OWHIGED

01152007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number
NOT APPLICABLE

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

Jan 29, 2007 08:00 AM Secretary of State

6. Name and Address of Current Registered Agent

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

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S	GNATURE	(NOTE: Registered Agent signature required when reinstating)	DATE
8.	The above named entity submits this statement for the purpose of chathe obligations of registered agent.	anging its registered office or registered agent, or both, in	the State of Florida. I am familiar with, and accept

Filing Fee is \$50.00 Due by May 1, 2007 U00000607636 01/31/07-80045-019 50.00

9.	MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ENTEGRA POWER GROUP LLC 100 S. ASHLEY DRIVE, STE 1400 TAMPA, FL 33602	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-SI-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
11. I hereby certify that the information supplied with this filling does not qualify for the e		

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

URE: Teny Coffey Seans

1/16/08

813-301-4998

Daytime Phone #