

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

May 08, 2008 08:00 AM  
Secretary of State

DOCUMENT # P02854

1. Entity Name  
EMPIRE PIPE & SUPPLY COMPANY



Principal Place of Business

2301 ALTON RD.  
P.O. BOX 101149  
BIRMINGHAM, AL 35210

Mailing Address

2301 ALTON RD.  
P.O. BOX 101149  
BIRMINGHAM, AL 35210



05062008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 63-0635636	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

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

DO NOT WRITE  
IN THIS SPACE

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00  
Due by September 12, 2008

9. Election Campaign Financing  
Trust Fund Contribution.

☐ \$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCD WALKER, CULLOM JR. 2301 ALTON RD BIRMINGHAM, AL 35210
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VST SAWYER, MICHAEL J. 2301 ALTON RD BIRMINGHAM, AL 35210
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V CAMPBELL, MICHAEL A 2301 ALTON RD BIRMINGHAM, AL 35210
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000000950030  
06/03/08-80052-021 550.00

DO NOT WRITE  
IN THIS SPACE

12. 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 or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Mike Sawyer* Mike Sawyer

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-6-08

Date

205-956-1010

Daytime Phone #