

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000067137

FILED  
Apr 01, 2005  
Secretary of State

Entity Name: BRECKENRIDGE PIPES & CO.

## Current Principal Place of Business:

1536 KINGSLEY AVE SUITE 116  
ORANGE PARK, FL 32073

## New Principal Place of Business:

## Current Mailing Address:

1536 KINGSLEY AVE SUITE 116  
ORANGE PARK, FL 32073

## New Mailing Address:

FEI Number: 59-3591677

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PIPES, WILLIAM B  
1536 KINGSLEY AVE SUITE 116  
ORANGE PARK, FL 32073 US

## Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: PIPES, WILLIAM B  
Address: 1536 KINGSLEY AVE SUITE 116  
City-St-Zip: ORANGE PARK, FL 32073

Title: STD ( ) Delete  
Name: PIPES, HELLEN J  
Address: 1728 KINGSLEY AVENUE SUITE 105  
City-St-Zip: ORANGE PARK, FL 32073

Title: D ( ) Delete  
Name: PALMER, MELISSA H  
Address: 109 OWSLEY AVE.  
City-St-Zip: LEXINGTON, KY 40502

Title: D ( ) Delete  
Name: PIPES, N. BRECKENRIDGE  
Address: 109 OWSLEY AVE.  
City-St-Zip: LEXINGTON, KY 40502

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: STD (X) Change ( ) Addition  
Name: PIPES, HELLEN J  
Address: 1536 KINGSLEY AVENUE SUITE 116  
City-St-Zip: ORANGE PARK, FL 32073

Title: D (X) Change ( ) Addition  
Name: PALMER, MELISSA H  
Address: 426 HOLIDAY ROAD  
City-St-Zip: LEXINGTON, KY 40502

Title: D (X) Change ( ) Addition  
Name: PIPES, BRECKENRIDGE N  
Address: 112 LOGSDON COURT  
City-St-Zip: LOUISVILLE, KY 40243

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WILLIAM B. PIPES

PRES

04/01/2005

Electronic Signature of Signing Officer or Director

Date