

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000126583

**FILED**  
**Jan 14, 2017**  
**Secretary of State**  
**CC3113100073**

**Entity Name:** LIBERTY PIPELINE & COMPRESSOR SERVICES, INC.

**Current Principal Place of Business:**

22361 NE WHIPPOORWILL LANE  
HOSFORD, FL 32334

**Current Mailing Address:**

PO BOX 304  
HOSFORD, FL 32334 US

**FEI Number:** 20-1602775

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

BURKE, TERESA YVONNE  
22361 NE WHIPPOORWILL LANE  
HOSFORD, FL 32334 US

*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:** TERESA BURKE

01/14/2017

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           PRESIDENT  
Name           BURKE, TIMOTHY MARC  
Address        22361 NE WHIPPOORWILL LANE  
City-State-Zip: HOSFORD FL 32334

Title           VP  
Name           BURKE, EDDIE JOE  
Address        17886 N. E. ARNOLD KELLY RD.  
City-State-Zip: HOSFORD FL 32334

Title           SECRETARY  
Name           BURKE, TERESA YVONNE  
Address        22361 NE WHIPPOORWILL LANE  
City-State-Zip: HOSFORD FL 32334

*I hereby 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 all other like empowered.*

**SIGNATURE:** TERESA BURKE

SECRETARY

01/14/2017

Electronic Signature of Signing Officer/Director Detail

Date