

2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000001109

Entity Name: ROCKFORD PIPELINE CORPORATION**Current Principal Place of Business:**22845 NW BENNETT ST.
SUITE 150
HILLSBORO, OR 97124**Current Mailing Address:**22845 NW BENNETT ST.
SUITE 150
HILLSBORO, OR 97124**FEI Number:** 93-1021510**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	CFO
Name	MOERBEEK, PETE
Address	26000 COMMERCENTRE DR
City-State-Zip:	LAKE FOREST CA 92630
Title	D
Name	WELCH, FRANK O
Address	22845 NW BENNETT ST., STE 150
City-State-Zip:	HILLSBORO OR 97124
Title	VP
Name	ROCKFORD, PATRICK T
Address	568 NE GOLDIE DR
City-State-Zip:	HILLSBORO OR 97124

Title	S/D
Name	PERISICH, JOHN
Address	26000 COMMERCENTRE DR
City-State-Zip:	LAKE FOREST CA 92630
Title	P
Name	WELCH, FRANK O
Address	18201 NE BALD PEAK RD
City-State-Zip:	NEWBERG OR 97132

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: FRANK WELCH**PRESIDENT****01/25/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date