



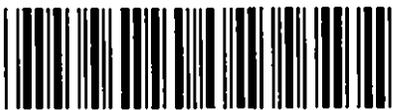
**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005**

Filing Period: January 1 - March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 105217		2. Name of Corporation Power Piping Company			
3. Street Address (Principal Business Office) 436 Butler Street Suite 201			City Pittsburgh	State PA	Zip 15223
4. Business Phone No. (412) 323-6200		5. State of Incorporation PENNSYLVANIA		6. SIC Code 273	
7. Brief Description of the Character of Business Conducted in Rhode Island DEALING WITH ACCOUNT POWER INDUSTRIAL PIPING, HANGERS AND SUPPORTS.					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Stephen J. Janaszek			Vice President Name William H. Green		
Street Address 436 Butler Street Suite 201			Street Address 445 Forum Pkwy		
City Pittsburgh	State PA	Zip 15223	City Rural Hall	State NC	Zip 27045
Secretary Name Gerald B. Engen Jr.			Treasurer Name Marco Martinez		
Street Address 12150 E. 112th Ave.			Street Address 1701 W. Golf Rd. Suite 1012		
City Henderson	State CO	Zip 80640	City Rolling Meadows	State IL	Zip 60008
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Gerald B. Engen Jr.			Director Name William A. Koertner		
Street Address 12150 E. 112th Ave.			Street Address 1701 W. Golf Rd. Suite 1012		
City Henderson	State CO	Zip 80640	City Rolling Meadows	State IL	Zip 60008
Director Name			Director Name		
Street Address			Street Address		
City			City		
State			State		
Zip			Zip		
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
15,000 COMM	\$10.00 PAR VALUE		9,900	Common	10.00

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



\*105217\*

File Date 2-7-05  
Check No. 00351387  
By: KTB  
FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Greg R. Medici 1/28/05  
Signature of Officer Date  
Print or Type Name of Officer  
Assistant Treasurer  
Title of Officer

ID#105217

**Power Piping Company**  
**436 Butler Street Suite 201**  
**Pittsburgh, PA 15223**  
**Phone: 412.323.6200**  
**Fax: 412.323.6334**

<u>Office/Title</u>	<u>Name and Address</u>
CEO	William A. Koertner 1701 W. Golf Rd. Suite 1012 Rolling Meadows, IL 60008
President	Stephen J. Janaszek 436 Butler St. Suite 201 Pittsburgh, PA 15223
Senior Vice President	William H. Green 445 Forum Parkway Rural Hall, NC 27045
Treasurer	Marco Martinez 1701 W. Golf Rd. Suite 1012 Rolling Meadows, IL 60008
Secretary	Gerald B. Engen Jr. 12150 E. 112 <sup>th</sup> Ave. Henderson, CO 80640
Assistant Treasurer	Greg R. Medici 1701 W. Golf Rd. Suite 1012 Rolling Meadows, IL 60008
Controller/Asst Secretary	Gregory T. Wolf 1701 W. Golf Rd. Suite 1012 Rolling Meadows, IL 60008
Assistant Secretary	Sandeep Kumar 1701 W. Golf Rd. Suite 1012 Rolling Meadows, IL 60008
Assistant Secretary	Debra A. Griffiths 436 Butler St. Suite 201 Pittsburgh, PA 15223

**Page 2 – Power Piping Company Officers**

ID# 105217

Director William A. Koertner  
1701 W. Golf Rd. Suite 1012  
Rolling Meadows, IL 60008

Director Gerald B. Engen Jr.  
12150 E. 112<sup>th</sup> Ave.  
Henderson, CO 80640



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State

Matthew A. Brown, Secretary of State

Corporations Division
100 North Main Street
Providence, RI 02903-1335
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004

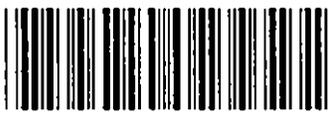
Filing Period: January 1 - March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

Form with sections for Corporate ID No., Name of Corporation, Street Address, Business Phone No., State of Incorporation, SIC Code, Brief Description of Business, Officers (President, Vice President, Secretary, Treasurer), and Directors (Names and Addresses).

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

FILED



AUG 23 2004

By EMC

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer: Marco A. Martinez 9/24/04

Print or Type Name of Officer: Marco Martinez

Title of Officer: Treasurer

File Date, Check No, By, FOR SECRETARY OF STATE USE ONLY



**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003**  
Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. **105217**  
2. Name of Corporation **Power Piping Company**  
3. Street Address Principal Business Office  
**436 Butler Street Ste 201**  
4. Business Phone No. **(412) 323-2274**  
5. State of Incorporation **PENNSYLVANIA**  
7. Brief Description of the Character of Business Conducted in Rhode Island  
**Electrical Construction**

City **Pittsburgh** State **PA** Zip **15223**  
6. SIC Code **273**

**8. NAMES AND ADDRESSES OF THE OFFICERS (\*X\* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name **William S. Skibitsky**  
Street Address **1701 W. Golf Rd Ste 1012**  
City **Rolling Meadows** State **IL** Zip **60008**  
Secretary Name **Gerald B. Engen Jr.**  
Street Address **1701 W. Golf Rd Ste 1012**  
City **Rolling Meadows** State **IL** Zip **60008**

Vice President Name **Michael F. Knapp**  
Street Address **1701 W. Golf Rd. Ste 1012**  
City **Rolling Meadows** State **IL** Zip **60008**  
Treasurer Name **William A. Koertner**  
Street Address **1701 W. Golf Rd Ste 1012**  
City **Rolling Meadows** State **IL** Zip **60008**

**9. NAMES AND ADDRESSES OF THE DIRECTORS (\*X\* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS**

Director Name **Gerald B. Engen Jr.**  
Street Address **1701 W. Golf Rd Ste 1012**  
City **Rolling Meadows** State **IL** Zip **60008**  
Director Name **William S. Skibitsky**  
Street Address **1701 W. Golf Rd Ste 1012**  
City **Rolling Meadows** State **IL** Zip **60008**

Director Name  
Street Address  
City State Zip  
Director Name  
Street Address  
City State Zip

**10. SHARES AUTHORIZED (\*X\* BOX FOR ATTACHMENT)**

AUTHORIZED SHARES  
Number of Shares Class/Series Par Value  
**10,000 COMM \$10.00 PAR VALUE**  
**15,000 (see attached)**

**11. SHARES ISSUED (\*X\* BOX FOR ATTACHMENT)**

ISSUED SHARES  
Number of Shares Class/Series Par Value  
**9,900 Common \$10.00**

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



\* 1 0 5 2 1 7 \*

File Date: **3-31-03**  
Check No.: **2295**  
By: **[Signature]**

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer **[Signature]** Date  
Print or Type Name of Officer **William A. Koertner**  
Title of Officer **Treasurer**



**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002**

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **105217** 2. Name of Corporation **Power Piping Company**  
3. Street Address Principal Business Office **Four Allegheny Center Ste. 401** City **Pittsburgh** State **PA** Zip **15212**  
4. Business Phone No. **(412) 323-2274** 5. State of Incorporation **PENNSYLVANIA** 6. SIC Code **273**

7. Brief Description of the Character of Business Conducted in Rhode Island  
**Electrical Construction**

**8. NAMES AND ADDRESSES OF THE OFFICERS (\*X\* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS**

<p>President Name <b>Stephen J. Janaszek</b> Street Address <b>Four Allegheny Center Suite 401</b> City <b>Pittsburgh</b> State <b>PA</b> Zip <b>15212</b></p>	<p>Vice President Name <b>Michael F. Knapp</b> Street Address <b>1701 W. Golf Rd. Suite 1012</b> City <b>Rolling Meadows</b> State <b>IL</b> Zip <b>60008</b></p>
<p>Secretary Name <b>Byron D. Nelson</b> Street Address <b>1701 W. Golf Rd. Suite 1012</b> City <b>Rolling Meadows</b> State <b>IL</b> Zip <b>60008</b></p>	<p>Treasurer Name <b>William A. Koertner</b> Street Address <b>1701 W. Golf Rd. Suite 1012</b> City <b>Rolling Meadows</b> State <b>IL</b> Zip <b>60008</b></p>

**9. NAMES AND ADDRESSES OF THE DIRECTORS (\*X\* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS**

<p>Director Name <b>Byron D. Nelson</b> Street Address <b>1701 W. Golf Rd. Suite 1012</b> City <b>Rolling Meadows</b> State <b>IL</b> Zip <b>60008</b></p>	<p>Director Name <b>William S. Skibitsky</b> Street Address <b>1701 W. Golf Rd. Suite 1012</b> City <b>Rolling Meadows</b> State <b>IL</b> Zip <b>60008</b></p>
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**10. SHARES AUTHORIZED (\*X\* BOX FOR ATTACHMENT)**

AUTHORIZED SHARES  
Number of Shares Class/Series Par Value  
**10,000 COMM \$10.00 PAR VALUE**

**11. SHARES ISSUED (\*X\* BOX FOR ATTACHMENT)**

ISSUED SHARES  
Number of Shares Class/Series Par Value  
**9,900**

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



\* 1 0 5 2 1 7 \*

File Date: 02-15-02  
2346661  
Check No.: \_\_\_\_\_  
By: [Signature]

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

[Signature] 1/18/02  
Signature of Officer Date  
William A. Koertner  
Print or Type Name of Officer  
Treasurer  
Title of Officer



**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001**

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **105217** 2. Name of Corporation **Power Piping Company**

3. Street Address Principal Business Office **Four Allegheny Center Ste 401** City **Pittsburgh** State **PA** Zip **15212**  
4. Business Phone No. **(412) 323-2274** 5. State of Incorporation **PENNSYLVANIA** 6. SIC Code **273**

7. Brief Description of the Character of Business Conducted in Rhode Island  
**Electrical Construction**

**8. NAMES AND ADDRESSES OF THE OFFICERS (\*X\* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name **Stephen J. Janaszek**  
Street Address **Four Allegheny Center Ste. 401**  
City **Pittsburgh** State **PA** Zip **15212**

Vice President Name  
Street Address  
City State Zip

Secretary Name **Byron D. Nelson**  
Street Address **1701 W. Golf Rd. Suite 1012**  
City **Rolling Meadows IL** State **IL** Zip **60008**

Treasurer Name **William A. Koertner**  
Street Address **1701 W. Golf Rd. Suite 1012**  
City **Rolling Meadows IL** State **IL** Zip **60008**

**9. NAMES AND ADDRESSES OF THE DIRECTORS (\*X\* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS**

Director Name **Byron D. Nelson**  
Street Address **1701 W. Golf Rd. Suite 1012**  
City **Rolling Meadows IL** State **IL** Zip **60008**

Director Name  
Street Address  
City State Zip

Director Name **William S. Skibitsky**  
Street Address **1701 W. Golf Rd. Suite 1012**  
City **Rolling Meadows IL** State **IL** Zip **60008**

Director Name  
Street Address  
City State Zip

**10. SHARES AUTHORIZED (\*X\* BOX FOR ATTACHMENT)**

AUTHORIZED SHARES  
Number of Shares Class/Series Par Value  
**10,000 COMM \$10.00 PAR**

**11. SHARES ISSUED (\*X\* BOX FOR ATTACHMENT)**

ISSUED SHARES  
Number of Shares Class/Series Par Value  
**9,900**

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



\* 1 0 5 2 1 7 \*

File Date: 1/16  
250831  
Check No.: 22  
By: \_\_\_\_\_

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Ang R. Medic 1/9/01  
Signature of Officer Date

Print or Type Name of Officer

Title of Officer



**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2000**  
Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 2. Name of Corporation

105217 Power Piping Company  
3. Street Address Principal Business Office  
FOUR ALLEGHENY CENTER, STE 401 PITTSBURGH PA 15212  
4. Business Phone No. 5. State of Incorporation  
412/323-2274 PENNSYLVANIA  
6. SIC Code  
273  
7. Brief Description of the Character of Business Conducted in Rhode Island  
ELECTRICAL CONSTRUCTION

8. NAMES AND ADDRESSES OF THE OFFICERS (\*X\* BOX FOR ATTACHMENT) **FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name STEPHEN J. JANASZEK Street Address FOUR ALLEGHENY CENTER, STE 401 City State Zip PITTSBURGH PA 15212	Vice President Name  Street Address  City State Zip    
Secretary Name BYRON D. NELSON Street Address 1701 W. GOLF RD, STE 1012 City State Zip ROLLING MEADOWS IL 60008	Treasurer Name WILLIAM A. KOERTNER Street Address 1701 W. GOLF RD, STE 1012 City State Zip ROLLING MEADOWS IL 60008

9. NAMES AND ADDRESSES OF THE DIRECTORS (\*X\* BOX FOR ATTACHMENT) **FILL IN SPACES BEFORE USING ATTACHMENTS**

Director Name CHARLES M. BRENNAN III Street Address 1701 W. GOLF RD, STE 1012 City State Zip ROLLING MEADOWS IL 60008	Director Name WILLIAM S. SKIBITSKY Street Address 1701 W. GOLF RD, STE 1012 City State Zip ROLLING MEADOWS IL 60008
Director Name BYRON D. NELSON Street Address 1701 W. GOLF RD, STE 1012 City State Zip ROLLING MEADOWS IL 60008	Director Name  Street Address  City State Zip    

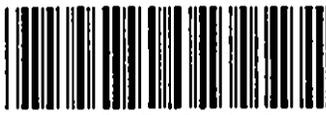
10. SHARES AUTHORIZED (\*X\* BOX FOR ATTACHMENT)

AUTHORIZED SHARES  
Number of Shares Class/Series Par Value  
10,000 COMM \$10.00 PAR

11. SHARES ISSUED (\*X\* BOX FOR ATTACHMENT)

ISSUED SHARES  
Number of Shares Class/Series Par Value  
9,900

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



\* 1 0 5 2 1 7 \*

File Date: 3/16/00  
Check No.: 227793  
By: [Signature]

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

[Signature] 2-25-00  
Signature of Officer Date  
GREG R. MEDICI  
Print or Type Name of Officer  
ASSISTANT TREASURER  
Title of Officer