

1.) CORPORATION NAME:

INFRASOURCE PIPELINE FACILITIES, INC.

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.**

AUTH IN VI

CORPORATION SERVICE COMPANY

Bank of America Center, 16th Floor

1111 East Main Street

RICHMOND, VA 23219

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

NC

DUE DATE: **9/30/2011**

SCC ID NO: **F1485632**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	5,000

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 11712 STATESVILLE RD

CITY/ST/ZIP: HUNTERSVILLE, NC 28078-

7.) DIRECTORS AND PRINCIPAL OFFICERS:

All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: SCOT P. FLUHARTY
TITLE: PRESIDENT
ADDRESS: 4500 N. MISSION ROAD
CITY/ST/ZIP/CO: ROSEBUSH, MI 48878-

OFFICER

DIRECTOR

NAME: CAROLYN M. CAMPBELL
TITLE: SECRETARY
ADDRESS: 2800 POST OAK BLVD STE 2600
CITY/ST/ZIP/CO: HOUSTON, TX 77056-

OFFICER

DIRECTOR

NAME: MICHAEL J. MCARTHY
TITLE: CFO/SVP/AT
ADDRESS: 1200 ROOSEVELT ROAD
STE 400
CITY/ST/ZIP/CO: GLEN ELLYN, IL 60134-

OFFICER

DIRECTOR

NAME: NICHOLAS M. GRINDSTAFF
TITLE: TREASURER
ADDRESS: 2800 POST OAK BLVD STE 2600
CITY/ST/ZIP/CO: HOUSTON, TX 77056-

OFFICER

DIRECTOR

NAME: TANA L POOL
TITLE: VP/AS
ADDRESS: 2800 POST OAK BLVD STE 2600
CITY/ST/ZIP/CO: HOUSTON, TX 77056-

OFFICER

DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DERRICK A. JENSEN VP/AS 2800 POST OAK BLVD STE 2600 HOUSTON, TX 77056-	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JAMES H. HADDOX VP/AS 2800 POST OAK BLVD STE 2600 HOUSTON, TX 77056-	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	SCOTT RUSHING VICE PRESIDENT 11712 STATESVILLE RD HUNTERVILLE, NC 28078-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CECIL D. BRADFORD III SVP 11712 STATESVILLE RD HUNTERVILLE, NC 28078-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JACK R. WEBB ASST SECRETARY 4033 E. MORGAN RD YPSILANTI, MI 48197-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ CAROLYN M. CAMPBELL SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	CAROLYN M. CAMPBELL, SECRETARY PRINTED NAME AND CORPORATE TITLE	8/26/2011 DATE
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It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.