

SCC eFile

**2013 ANNUAL REPORT  
COMMONWEALTH OF VIRGINIA  
STATE CORPORATION COMMISSION**

213519592

1.) CORPORATION NAME:

**Buckeye Pipe Line Services Company**

DUE DATE: **4/30/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CORPORATION SERVICE COMPANY**

**Bank of America Center, 16th Floor  
1111 East Main Street**

SCC ID NO: **F1858895**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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**RICHMOND, VA**

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**RICHMOND CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**PA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 5 TEK PARK 9999 HAMILTON BLVD

CITY/ST/ZIP: BREINIGSVILLE, PA 18031

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:	CLARK C SMITH	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	5 TEK PARK 9999 HAMILTON BLVD		
CITY/ST/ZIP/CO:	BREINIGSVILLE, PA 18031		

NAME:	JEREMIAH J ASHCROFT III	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	5 TEK PARK 9999 HAMILTON BLVD		
CITY/ST/ZIP/CO:	BREINIGSVILLE, PA 18031		

NAME:	COREY C AYERS	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	5 TEK PARK 9999 HAMILTON BLVD		
CITY/ST/ZIP/CO:	BREINIGSVILLE, PA 18031		

NAME:	TODD J. RUSSO	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	5 TEK PARK 9999 HAMILTON BLVD		
CITY/ST/ZIP/CO:	BREINIGSVILLE, PA 18031		

NAME:	JOSEPH A LASALA JR	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	5 TEK PARK 9999 HAMILTON BLVD		
CITY/ST/ZIP/CO:	BREINIGSVILLE, PA 18031		

NAME:	Keith E. St.Clair	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	5 TEK PARK 9999 HAMILTON BLVD		
CITY/ST/ZIP/CO:	BREINIGSVILLE, PA 18031		

NAME:	Stephen C. Muther	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	OFFICER		
ADDRESS:	5 TEK PARK 9999 HAMILTON BLVD		
CITY/ST/ZIP/CO:	BREINIGSVILLE, PA 18031		

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.

<u>/s/ Stephen C. Muther</u>	<u>Stephen C. Muther,</u>	<u>4/25/2013</u>
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE

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.