

2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 810432

Entity Name: INDUSTRIAL PIPING, INC.**Current Principal Place of Business:**800 CULP ROAD
PINEVILLE, NC 28134**Current Mailing Address:**800 CULP ROAD
PINEVILLE, NC 28134 US**FEI Number:** 56-0578325**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 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 CEO / PRESIDENT / CHAIRMAN OF
THE BOARD
Name BOORD, STEPHEN
Address 800 CULP ROAD
City-State-Zip: PINEVILLE NC 28134

Title CFO / TREASURER
Name COSTON, ROBERT G
Address 800 CULP ROAD
City-State-Zip: PINEVILLE NC 28134

Title DIRECTOR
Name HUSSEY, KENT
Address 5250 LONG ISLAND DR. NW
City-State-Zip: ATLANTA GA 30327

Title DIRECTOR
Name SHELTON, CHARLIE
Address 2849 PACES FERRY ROAD
STE 160
City-State-Zip: ATLANTA GA 30339

Title SECRETARY
Name LANE, EVE
Address 800 CULP ROAD
City-State-Zip: PINEVILLE NC 28134

Title DIRECTOR
Name BRANNON, STEVE
Address 2849 PACES FERRY ROAD
STE 160
City-State-Zip: ATLANTA GA 30339

Title DIRECTOR / VICE CHAIRMAN
Name JONES, MICHAEL
Address 800 CULP ROAD
City-State-Zip: PINEVILLE NC 28134

Title DIRECTOR
Name WEBER, DANIEL
Address 1117 WYNTERHALL LANE
City-State-Zip: ATLANTA GA 30338

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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: ROBERT G. COSTON**CFO / TREASURER****06/02/2015**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	WOOTTON, MICHAEL
Address	8 PORT TACK HILTON
City-State-Zip:	HEAD ISLAND SC 29928