


2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

SECRETARY OF STATE
DIVISION OF CORPORATIONS

06 OCT 13 AM 8:50

DOCUMENT # F04000003952					
1. Entity Name CHESTER ENGINEERS, INC.					
Principal Place of Business 260 AIRSIDE DR MOON TOWNSHIP, PA 15108			Mailing Address 260 AIRSIDE DR MOON TOWNSHIP, PA 15108		
2. Principal Place of Business		3. Mailing Address			
Suits, Apt #, etc		Suits, Apt #, etc			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 25-1570566	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525				7. Name and Address of New Registered Agent	
				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				City	
				FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ DATE _____ <small>Signature: typed or printed name of registered agent and filer if applicable (NOTE: Registered Agent signature required when reclassifying)</small>					
10. Amended AR is \$61.25		9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCEO AGBEDE, ROBERT 260 AIRSIDE DR MOON TOWNSHIP, PA 15108	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Steven Rene Schoedinger 4600 San Amaro Drive Coral Gables, FL 33146	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BERKEY, EDGAR PH.D. 6203 LANDING LANE MOON TOWNSHIP, PA 151082793	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Les Matthews 2120 E. Linwood Blvd., Suite 400 Kansas City, MO 64109	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SPENCER, GREGORY 1020 DEVONSHIRE ROAD PITTSBURGH, PA 15213	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Renee S. Frazier 415 Holiday Drive Pittsburgh, PA 15220	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MILES, GEORGE 4802 FIFTH AVE PITTSBURGH, PA 15213	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS William Swain, Jr. 260 Airside Drive Moon Township, PA 15108	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AST TOMINA, KATHLEEN 260 AIRSIDE DR MOON TOWNSHIP, PA 15108	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Lawrence O. Owoputi 260 Airside Drive Moon Township, PA 15108	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Kathleen M. Tomina</u> Asst Secretary 10-12-06 (412) 809-6000					