


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 29, 2008 8:00 am
Secretary of State

01-29-2008 90016 026 ***158.75

DOCUMENT # F04000003952

1. Entity Name
CHESTER ENGINEERS, INC.



Principal Place of Business Mailing Address
260 AIRSIDE DR **260 AIRSIDE DR**
MOON TOWNSHIP, PA 15108 **MOON TOWNSHIP, PA 15108**

2. Principal Place of Business - No P.O. Box # 3. Mailing Address
 Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country



01222008 Chg-P CR2E034 (12/06)

4. FEI Number Applied For
25-1570566 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '07	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCEO AGBEDE, ROBERT <input type="checkbox"/> Delete 260 AIRSIDE DR MOON TOWNSHIP, PA 15108	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Tommy L. Johnson 260 Airside Drive Moon Township, PA 15108
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BERKEY, EDGAR PH.D. <input type="checkbox"/> Delete 6203 LANDING LANE MOON TOWNSHIP, PA 151082793	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Assistant Secretary/Treasurer <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Janice M. Elliott 260 Airside Drive Moon Township, PA 15108
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SPENCER, GREGORY <input type="checkbox"/> Delete 1020 DEVONSHIRE ROAD PITTSBURGH, PA 15213	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MILES, GEORGE <input type="checkbox"/> Delete 4802 FIFTH AVE PITTSBURGH, PA 15213	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AST <input checked="" type="checkbox"/> Delete TOMINA, KATHLEEN 260 AIRSIDE DR MOON TOWNSHIP, PA 15108	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP <input type="checkbox"/> Delete SCHOEDINGER, STEVEN RENE 4600 SAN AMARO DRIVE CORAL GABLES, FL 33146	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input 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: _____ **1-23-08** _____
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #