


**2007 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Feb 26, 2007 08:00 AM**  
**Secretary of State**

DOCUMENT # F99000004006 1. Entity Name AEC ENGINEERING, INC.	
--	---

Principal Place of Business 400 1ST AVE., STE 400 MINNEAPOLIS, MN 55401	Mailing Address 400 1ST AVE., STE 400 MINNEAPOLIS, MN 55401
---	---

**DO NOT WRITE IN THIS SPACE**



02062007 No Chg-P CR2E034 (11/05)

4. FEI Number 41-1377685	Applied For Not Applicable
-----------------------------	-------------------------------

5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
---	---------------------------------------

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM  
 1200 SOUTH PINE ISLAND ROAD  
 PLANTATION, FL 33324

**DO NOT WRITE IN THIS SPACE**

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: Roberta Bear (NOTE: Registered Agent signature required when reinstating) DATE: \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2007 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C BUZEK, JOHN 400 1ST AVE N, STE. 400 MINNEAPOLIS, MN 55401
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD LORENTZ, TOM 400 1ST AVE N, STE. 400 MINNEAPOLIS, MN 55401
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LIPPS, RANDY 5540 FALMOUTH ST STE 300 RICHMOND, VA 23230
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD HEISTAND, TAV 400 1ST AVE N, STE 400 MINNEAPOLIS, MN 55401
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U000000648132  
 03/06/07-80101-001 150.00

**DO NOT WRITE IN THIS SPACE**

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: Roberta Bear Roberta Bear 2/9/07

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #