

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000004884

FILED  
Jul 02, 2004  
Secretary of State

Entity Name: ENGINEERING CONSULTING SERVICES, LTD. CORPORATION

**Current Principal Place of Business:**

14026 THUNDERBOLT PLACE  
SUITE 100  
CHANTILLY, VA 201513232 US

**New Principal Place of Business:**

**Current Mailing Address:**

14026 THUNDERBOLT PLACE  
SUITE 100  
CHANTILLY, VA 201513232 US

**New Mailing Address:**

FEI Number: 54-1439291      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

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

**Name and Address of New Registered Agent:**

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.  
Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PC ( ) Delete  
Name: LUCAS, HENRY L  
Address: 6163 HIDDEN CANYON ROAD  
City-St-Zip: CENTREVILLE, VA 20120

Title: VD ( ) Delete  
Name: ECKERT, JAMES W  
Address: 11446 VALE SPRING DRIVE  
City-St-Zip: OAKTON, VA 22124

Title: T ( ) Delete  
Name: ECKERT, JAMES A  
Address: 10052 NAUGHTON COURT  
City-St-Zip: BRISTOW, VA 20136

Title: VD ( ) Delete  
Name: CARPENTER, JAMES R  
Address: 5433 BRADDOCK RIDGE DR  
City-St-Zip: CENTREVILLE, VA 20120

Title: VD ( ) Delete  
Name: BALDRIDGE, JAMES H  
Address: 1393 PARK LAKE DRIVE  
City-St-Zip: RESTON, VA 20190

Title: VD ( ) Delete  
Name: HACKMAN, ROBERT E  
Address: 9705 ORIOLE COURT  
City-St-Zip: ELLICOTT CITY, MD 21042

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JAMES A. ECKERT

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

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07/02/2004

\_\_\_\_\_ Date