

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P22243

FILED
Feb 20, 2008
Secretary of State

Entity Name: VAUGHN & MELTON CONSULTING ENGINEERS (KENTUCKY), INC.

Current Principal Place of Business:

109 S 24TH STREET
MIDDLEBORO, KY 409651515 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1425
MIDDLESBORO, KY 409653225 US

New Mailing Address:

FEI Number: 61-0663508 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SCOTT, RANDOLPH J
Address: 109 SO 24TH ST
City-St-Zip: MIDDLESBORO, KY 40965

Title: VD () Delete
Name: SCHNEIDER, JOHN K
Address: 109 S 24 ST
City-St-Zip: MIDDLESBORO, KY 40965

Title: S () Delete
Name: BRUNSMA, MITCHEL
Address: 109 S 24TH ST.
City-St-Zip: MIDDLESBORO, KY 40965

Title: D () Delete
Name: CORDER, KEN
Address: 109 S. 24TH STREET
City-St-Zip: MIDDLESBORO, KY 40965

Title: D () Delete
Name: GOODIN, CLINT
Address: 1095 24TH STREET
City-St-Zip: MIDDLESBORO, KY 40965

Title: T () Delete
Name: LONGWORTH, DANNY L
Address: 109 S 24TH STREET
City-St-Zip: MIDDLESBORO, KY 40965

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
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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 exemption stated 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 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: DANNY L. LONGWORTH

Electronic Signature of Signing Officer or Director

TREA

02/20/2008

Date