

2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 23, 2008 8:00 am
Secretary of State

04-23-2008 90038 025 ***150.00

DOCUMENT # F07000000925

1. Entity Name

STEWART ENGINEERING, INC.



Principal Place of Business

260 TOWN HALL DR., SUITE C
MORRISVILLE NC 27560

Mailing Address

260 TOWN HALL DR., SUITE C
MORRISVILLE NC 27560



2. Principal Place of Business - No P.O. Box #

421 Fayetteville St, Ste 400

Suite, Apt. #, etc.

Raleigh, NC

City & State

27601

Zip

Country

USA

3. Mailing Address

421 Fayetteville St, Ste 400

Suite, Apt. #, etc.

Raleigh, NC

City & State

27601

Zip

Country

USA

1st MOORE

CR2E034 (10/07)

4. FEI Number

56-1854766

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CAPITAL CONNECTION, INC.
417 E. VIRGINIA ST., SUITE 1
TALLAHASSEE FL 32301

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

Signature, typed or printed name of registered agent and title (if applicable).

(NOTE: Registered Agent signature required when transferring)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2008 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution: ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PCOB	☐ Delete
NAME	STEWART, WILLY E PE	
STREET ADDRESS	260 TOWN HALL DR., SUITE C	
CITY- ST- ZIP	MORRISVILLE NC 27560	
TITLE	VPD	☐ Delete
NAME	KRANNITZ, MICHAEL PE	
STREET ADDRESS	260 TOWN HALL DR., SUITE C	
CITY- ST- ZIP	MORRISVILLE NC 27560	
TITLE	VPD	☐ Delete
NAME	RUGGLES, DAVID PE	
STREET ADDRESS	260 TOWN HALL DR., SUITE C	
CITY- ST- ZIP	MORRISVILLE NC 27560	
TITLE	VSTD	☐ Delete
NAME	MACIA, ROBERT PE	
STREET ADDRESS	260 TOWN HALL DR., SUITE C	
CITY- ST- ZIP	MORRISVILLE NC 27560	
TITLE	VPD	☐ Delete
NAME	JENKINS, JOHN PE	
STREET ADDRESS	260 TOWN HALL DR., SUITE C	
CITY- ST- ZIP	MORRISVILLE NC 27560	
TITLE	VPD	☒ Delete
NAME	NIGG, JIM	
STREET ADDRESS	260 TOWN HALL DR., SUITE C	
CITY- ST- ZIP	MORRISVILLE NC 27560	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		☒ Change ☐ Addition
NAME		
STREET ADDRESS	421 Fayetteville St, Ste 400	
CITY- ST- ZIP	Raleigh, NC 27601	
TITLE		☒ Change ☐ Addition
NAME		
STREET ADDRESS	421 Fayetteville St, Ste 400	
CITY- ST- ZIP	Raleigh, NC 27601	
TITLE		☒ Change ☐ Addition
NAME		
STREET ADDRESS	421 Fayetteville St, Ste 400	
CITY- ST- ZIP	Raleigh, NC 27601	
TITLE		☒ Change ☐ Addition
NAME		
STREET ADDRESS	421 Fayetteville St, Ste 400	
CITY- ST- ZIP	Raleigh, NC 27601	
TITLE		☒ Change ☐ Addition
NAME		
STREET ADDRESS	421 Fayetteville St, Ste 400	
CITY- ST- ZIP	Raleigh, NC 27601	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #