

**2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 830597

**Entity Name:** O'BRIEN & GERE ENGINEERS, INC.

**Current Principal Place of Business:**

333 W WASHINGTON ST  
SYRACUSE, NY 13202

**Current Mailing Address:**

PO BOX 4873  
SYRACUSE, NY 13221

**FEI Number: 16-0980138**

**Certificate of Status Desired: No**

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

NRAI SERVICES, INC.  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

*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

**Officer/Director Detail :**

Title PRD  
Name DAVIS, R LELAND  
Address 333 W WASHINGTON ST  
City-State-Zip: SYRACUSE NY 13202

Title CEOD  
Name FOX, JAMES A  
Address 333 W WASHINGTON ST  
City-State-Zip: SYRACUSE NY 13202

Title TD  
Name MCNULTY, JOSEPH M  
Address 4922 CORNISH HEIGHTS  
City-State-Zip: SYRACUSE NY 13215

Title AS  
Name SUTPHEN, JOHN F  
Address 5100 BROCKWAY LANE  
City-State-Zip: FAYETTEVILLE NY 13066

Title SD  
Name NOWLAN, THOMAS A  
Address 301 E GERMANTOWN PIKE, 3RD FLOOR  
City-State-Zip: EAST NORRITON PA 19401

*I hereby 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 all other like empowered.*

**SIGNATURE: JOHN F. SUTPHEN**

**ASST SECRETARY**

**04/03/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date