

2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F12000002780

Entity Name: GEOENGINEERS, INC.**Current Principal Place of Business:**600 STEWART ST.
SUITE 1700
SEATTLE, WA 98101**Current Mailing Address:**600 STEWART ST.
SUITE 1700
SEATTLE, WA 98101 US**FEI Number:** 91-6237984**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**NATIONAL CORPORATE RESEARCH,LTD., INC.
155 OFFICE PLAZA DRIVE
TALLAHASSEE, FL 32301 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 PRESIDENT/CEO
Name FRAESE, KURT D
Address 600 STEWART ST.
 SUITE 1700
City-State-Zip: SEATTLE WA 98101

Title TREASURER/CFO
Name ROREM, CARRIE G
Address 8410 154TH AVE NE
City-State-Zip: REDMOND WA 98052

Title DIRECTOR
Name COOK, DAVID A
Address 600 STEWART ST.
 SUITE 1700
City-State-Zip: SEATTLE WA 98101

Title DIRECTOR/COB
Name SAULS, DAVID P.
Address 11955 LAKELAND PARK BLVD.
 SUITE 100
City-State-Zip: BATON ROUGE LA 70809

Title SECRETARY
Name HARAKAS, JAMES B
Address 523 E. 2ND AVE.
City-State-Zip: SPOKANE WA 99202

Title COO
Name CAMPBELL, DANIEL J
Address 8410 154TH AVE NE
City-State-Zip: REDMOND WA 98052

Title DIRECTOR
Name WALLACE, BILL
Address 600 STEWART ST.
 SUITE 1700
City-State-Zip: SEATTLE WA 98101

Title DIRECTOR
Name HUTCHINSON, MICHAEL
Address 1101 FAWCETT AVENUE
 SUITE 200
City-State-Zip: TACOMA WA 98402

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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: CARRIE G. ROREM

TREASURER/CFO

04/30/2014

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name CARLISLE, DANA L.
Address 8410 154TH AVE NE
City-State-Zip: REDMOND WA 98052

Title DIRECTOR
Name WALLACE, BILL
Address 600 STEWART ST.
SUITE 1700
City-State-Zip: SEATTLE WA 98101

Title DIRECTOR
Name HUTCHINSON, MICHAEL
Address 1101 FAWCETT AVENUE
SUITE 200
City-State-Zip: TACOMA WA 98402

Title DIRECTOR
Name MACDONALD, DOUG
Address 600 STEWART ST.
SUITE 1700
City-State-Zip: SEATTLE WA 98101

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