

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 04, 2001 8:00 am
Secretary of State

05-04-2001 90165 010 ***158.75

DOCUMENT # 303573
1. Entity Name
 Forensic Analysis + Engineering Corporation

Principal Place of Business
 5301 Capital Blvd #A
 Raleigh, NC 27616-2956
 US

Mailing Address
 P.O. Box 386
 Clearwater, FL 33757-0386

C0060292

2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
 City & State

4. FEI Number
 59-1152131

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
 STANLEY S. KOCHAN
 801 CHESTNUT ST. #1509
 CLEARWATER, FL 33756

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.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☒
(See criteria on back)

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	NAME	☐ Delete	TITLE	☐ Change	☐ Addition
STREET ADDRESS	POD Robert K. Kochan 7608 Wingfoot Dr. Raleigh, NC 27615-5484		STREET ADDRESS		
CITY-ST-ZIP	Raleigh, NC 27615-5484		CITY-ST-ZIP		
TITLE	NAME	☐ Delete	TITLE	☐ Change	☐ Addition
STREET ADDRESS	STD April Kochan 7608 Wingfoot Dr. Raleigh, NC 27615-5484		STREET ADDRESS		
CITY-ST-ZIP	Raleigh, NC 27615-5484		CITY-ST-ZIP		
TITLE	NAME	☐ Delete	TITLE	☐ Change	☐ Addition
STREET ADDRESS	D Stanley Kochan 801 Chestnut St. #1509 Clearwater, FL 33756		STREET ADDRESS		
CITY-ST-ZIP	Clearwater, FL 33756		CITY-ST-ZIP		
TITLE	NAME	☒ Delete	TITLE	☐ Change	☐ Addition
STREET ADDRESS	D David J. Haley 8 Dudley Circle Durham, NC 22770		STREET ADDRESS		
CITY-ST-ZIP	Durham, NC 22770		CITY-ST-ZIP		
TITLE	NAME	☐ Delete	TITLE	☐ Change	☐ Addition
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE	NAME	☐ Delete	TITLE	☐ Change	☐ Addition
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Robert K. Kochan, President, CEO 4/24/01 (919) 872-8788
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (11/00)