

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 817913

1. Entity Name

LOCKWOOD GREENE ENGINEERS INC

**FILED**  
**Apr 21, 2000 8:00 am**  
**Secretary of State**

04-21-2000 90136 008 \*\*\*150.00

Principal Place of Business  
1500 INTERNATIONAL DRIVE  
PO BOX 6280  
SPARTANBURG SC 29304-280  
US

Mailing Address  
ATTN GINA BRIGHT 1500 INTERNATIONAL DR  
PO BOX 6280  
SPARTANBURG SC 29304-6280  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 13-0980060

Applied For  
Not Applicable

Zip Country

Zip Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION FL 33324

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 \_\_\_\_\_ 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) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

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 P  
NAME LUGER, DONALD R.  
STREET ADDRESS 1635 BAKERS GLENN DR  
CITY-ST-ZIP DUNWOODY GA ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE V  
NAME COX, J. CARROLL  
STREET ADDRESS 8 WOODBURN RIDGE ROAD  
CITY-ST-ZIP SPARTANBURG SC ☒ Delete

TITLE Treasurer  
NAME Wendell Stidham  
STREET ADDRESS 408 Acorn Ridge Pl  
CITY-ST-ZIP Spartanburg SC 29301 ☐ Change ☒ Addition

TITLE VST  
NAME BRUNE, FRED M.  
STREET ADDRESS 441 CARLETON CIRCLE  
CITY-ST-ZIP SPARTANBURG SC ☐ Delete

TITLE President  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☒ Change ☐ Addition

TITLE V  
NAME SOWTER, KEVIN J.  
STREET ADDRESS 233 MADISON AVENUE  
CITY-ST-ZIP MADISON, NJ 07940 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE VP  
NAME FOWLER, M. LANE  
STREET ADDRESS 113 CINDER CREEK ROAD  
CITY-ST-ZIP SPARTANBURG SC ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE Asst. Treasurer  
NAME Robert C Hinds  
STREET ADDRESS 420 Maple Croft St.  
CITY-ST-ZIP Spartanburg SC 29303 ☐ Change ☒ Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Assistant Treasurer 1/6/00 (864) 518-2000

Date Daytime Phone #

CR2E034 (9/99)