

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 830597

FILED
Apr 12, 2007
Secretary of State

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

Current Principal Place of Business:

5000 BRITTONFIELD PARKWAY
EAST SYRACUSE, NY 13057

New Principal Place of Business:

Current Mailing Address:

5000 BRITTONFIELD PARKWAY
PO BOX 4873
SYRACUSE, NY 13221

New Mailing Address:

FEI Number: 16-0980138 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CBD () Delete
Name: ROLAND, STEVEN J
Address: 10 AURYANSEN COURT
City-St-Zip: CLOSTER, NJ 07624

Title: S () Delete
Name: JOHNSON, PETER C
Address: 1512 N BEECHAM DR
City-St-Zip: AMBLER, PA 19002

Title: TD () Delete
Name: MCNULTY, JOSEPH M
Address: 27-A BALL ROAD
City-St-Zip: SYRACUSE, NY 13215

Title: PD () Delete
Name: VAN ARNAM, DAVID G
Address: 4756 CORNISH HEIGHTS
City-St-Zip: SYRACUSE, NY 13215

Title: D () Delete
Name: BROWN, TERRY L
Address: 605 BRIAR BROOK RUN
City-St-Zip: FAYETTEVILLE, NY 13066

Title: AS () Delete
Name: SUTPHEN, JOHN F
Address: 5100 BROCKWAY LANE
City-St-Zip: FAYETTEVILLE, NY 13066

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JOHN F. SUTPHEN

AS

04/12/2007

Electronic Signature of Signing Officer or Director

_____ Date