## **FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00**

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # 843039

(9)

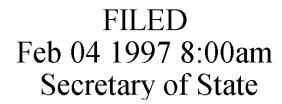
## TRANSPORTATION ENGINEERING SERVICES COMPANY

1044 E CHESTNUT ST

Principal Place of Business

Mailing Address

1044 E CHESTNUT ST





LOUISVILLE KY 40204		LOUISVILLE KY 40204-1019						
					3. Date Incorporated or Qualified 04/17/1979	3a. Dat	e of Las 2/1990	•
2. Principa' P	lace of Business	2a. Mailing Address			4. FEI Number	L, <del>T,.TIA.</del> -Y		Applied For
2400	Nelson Miller Parkw	a 96 2400 Nelson N	Miller	Parkwa	61-0850448			Not Applicable
Suite Apt.	# etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional Required
City & State 23 Louisville KY		City & State  28 Louisville KY		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees			
Zip	Country	Zip 29 40223 3	Country	· · · · · · · · · · · · · · · · · · ·	8. This corporation has liability for i		ax unde	
402	9. Name and Address of Current		<u></u>		10. Name and Address of New Re			
^T	CORPORATION SYSTEM		81	Name			<del>-</del>	······································
	0 S. PINE ISLAND ROAD				(5.0	1-5	<del></del> -	
	INTATION FL 33324		82	Street Addre	ess (P.O. Box Number is Not Acceptab	) 		
			83					
			84	City		FL	85 Z	p Code
11. Pursuant	to the provisions of Sections 607,0502	and 607,1508, Florida Statutes	the above	e-named corp	oration submits this statement for the p	ourpose of	changin	a its registered
agent. La	registered agent, or both, in the State i am familiar with, and accept the obliga	of Florida Such change was autitions of, Section 607,0505, Florid	thorized by da Statute:	the corporations.	on's board of directors. I hereby accep	ot the appo	iniment	as registered
SIGNATURE	55g-alus - typed or persodinan e al registered ager	r and title Lappicable. (NOTE: I	Registered Age	niuper erutangia Inc	ed when reinstating)	DATE		
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFIC			
THE	PT	☐ DELETE	1.1 TITLE		•		Chang	je 🔲 Additio
NAME	KLINE, GEORGE L.		1.2 NAME					
STREET ADDRESS	4650 MAIN STREET, NE		1.3 STREET	ADDRESS				
CHTY-ST-ZIP	FRIDLEY MN		1.4 CITY - 9	ST-ZIP				
TITLE	VP	☐ DELETE	2.1 TITLE				Chang	e L. Additio
NAME	THOMPSON, JOHN S		2.2 NAME					
STREET ADDRESS	1000 ONE MAIN STREET		2.3 STREET	1				
CHY-ST-ZIP	STAMFORD CT	Drift	2. 4 CITY-	S1 - 71P			- Ch	n Taggin
THILE	VP	☐ DELETE	3.1 TITLE				L. Chang	je 🔲 Additio
NAME	VAUGHN, AUBREY W		3.2 NAME					
STREET ADDRESS	1380 OLD FREEPORT ROAD		3.3 STREET					
CITY-ST-ZIP	PITTSBURGH PA S	DELETE	3.4 CITY- 4.1 TITLE	ST-ZIP			Chang	e Addition
TITLE	DEVYLDER, EDGAR P	ביין מנדנונ	1	}			L. PORMIN	le I''' WOOHOL
NAME			4 2 NAME	<b>:</b>				
STREET ADOPESS	1000 ONE MAIN PLACE		43 STREET					
CITY - S1 - ZIP	STAMFORD CT	DELETE	4.4 City - 5 5.1 Title	ST-ZIP		·	Chang	e Addition
TITLE	AS GOPLEN, DAVID J.	FT DECEME						נייין אטטינוט
NAME SERVE ADDRESS			5 2 NAME	. +000000				
STREET ADDRESS	4650 MAIN STREET, NE		5.3 STREET					
CITY-ST-ZiP	FRIDLEY MN	DELETE	5.4 CITY - 5	SI - ZIP			Chanc	ne Additio
TITLE	VP DENNINGER WILLIAM C	ר"ו מברבוב	6.1 TITLE				F*** (1818)	io F™I WORINO
NAME	DENNINGER, WILLIAM C	ADD HADOOD BADY	6.2 NAME					
STREET ADDRESS	333 LUDLOW STREET STAMFO	אאאן הטסאאח טאנ	6.3 STREE					
CITY - ST - 2IP	STAMFORD CT		6.4 CiTY-3	ST - ZIP				

I do 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 annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that + 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 12 or Block 13 if changed, or on an attachment with an address.