

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2006 8:00 am
Secretary of State

01-23-2006 90121 048 ***158.75



DOCUMENT # F0000003055
 1. Entity Name
CAROLLO ENGINEERS, A PROFESSIONAL CORPORATION

Principal Place of Business
**3033 N. 44TH ST. SUITE 101
 PHOENIX, AZ 85108**

Mailing Address
**10540 TALBERT AVE.
 STE 200 EAST
 FOUNTAIN VALLEY, CA 92708**

2. Principal Place of Business
3033 N. 44th St.
 Suite, Apt. #, etc.
Ste. 101

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

City & State
Phoenix, AZ

City & State

Zip
85018 Country **US**

Zip Country

01092006 Chg-P CR2E034 (11/05)

4. FEI Number
86-0899222 Applied For
 Not Applicable

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



6. Name and Address of Current Registered Agent
**CUSHING, ROBERT S
 401 N CATTLEMEN RD
 SUITE 306
 SARASOTA, FL 34232**

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. I am familiar with, and accept the obligations of registered agent.

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

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE	D	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	EIMSTAD, ROBERT B			NAME			
STREET ADDRESS	4380 SOUTHWEST MACADAM AVENUE STE 350			STREET ADDRESS			
CITY-ST-ZIP	PORTLAND, OR 972396406			CITY-ST-ZIP			
TITLE	SD	<input checked="" type="checkbox"/> Delete		TITLE	SD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	STUTZ-MCDONALD, SUSAN			NAME	Jamel Demir		
STREET ADDRESS	2700 YGNACIO VALLEY ROAD #300			STREET ADDRESS	2700 Ygnacio Valley Rd., #300		
CITY-ST-ZIP	WALNUT CREEK, CA 94598			CITY-ST-ZIP	Walnut Creek, CA 94598		
TITLE	PD	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	DEIS, GARY C			NAME			
STREET ADDRESS	2700 YGNACIO VALLEY RD, STE 300			STREET ADDRESS			
CITY-ST-ZIP	WALNUT CREEK, CA 94598			CITY-ST-ZIP			
TITLE	VD	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	HOUGH, STEPHEN G			NAME			
STREET ADDRESS	10540 TALBERT AVENUE SUITE 200 EAST			STREET ADDRESS			
CITY-ST-ZIP	FOUNTAIN VALLEY, CA 92708			CITY-ST-ZIP			
TITLE	TD	<input checked="" type="checkbox"/> Delete		TITLE	TD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	PUZAUSKAS JR, JOHN S			NAME	Rick D. Wheadon		
STREET ADDRESS	3033 N 44TH STREET #101			STREET ADDRESS	1265 Fort Union Blvd., Ste. 200		
CITY-ST-ZIP	PHOENIX, AZ 85018			CITY-ST-ZIP	Salt Lake City, UT 84047		
TITLE	D	<input checked="" type="checkbox"/> Delete		TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	DEMIR, JAMEL			NAME	Balakrishnan Narayanan		
STREET ADDRESS	2700 YGNACIO VALLEY ROAD #300			STREET ADDRESS	2700 Ygnacio Valley Rd., #300		
CITY-ST-ZIP	WALNUT CREEK, CA 94598			CITY-ST-ZIP	Walnut Creek, CA 94598		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Stephen G. Hough** **(714) 593-5100**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #