2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 02, 2004 08:00 AM
Secretary of State

DOCUMENT # F01000002876

1. Entity Name
KORDA/NEMETH ENGINEERING, INC.

Principal Place of Business	Mailing Address
1650 WATERMARK DRIVE, STE. 200 COLUMBUS, OH 43215-7010	1650 WATERMARK DRIVE, STE. 200 COLUMBUS, OH 43215-7010

DO NOT WRITE IN THIS SPACE

01072004 No Chg-P CR2E034 (10/03)

4. FEI Number
31-0922991

☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525

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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, 2004 Fee will be $550.00

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

10. OFFICERS AND DIRECTORS

TITLE	C
NAME	KORDA, PETER
STREET ADDRESS	1650 WATERMARK DRIVE, STE. 200
CITY-ST-ZIP	COLUMBUS, OH 432157010
TITLE	P
NAME	EISENMAN, MARK
STREET ADDRESS	1650 WATERMARK DRIVE, STE. 200
CITY-ST-ZIP	COLUMBUS, OH 432157010
TITLE	V
NAME	PETRIC, GERALD
STREET ADDRESS	1650 WATERMARK DRIVE, STE. 200
CITY-ST-ZIP	COLUMBUS, OH 432157010
TITLE	ST
NAME	DOYLE, THOMAS
STREET ADDRESS	1650 WATERMARK DRIVE, STE. 200
CITY-ST-ZIP	COLUMBUS, OH 432157010
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Thomas M Doyle Thomas M. Doyle, Treasurer 1/15/04 (614)487-1650
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #