## 2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# F04000003952

Entity Name: CHESTER ENGINEERS, INC.

FILED Nov 04, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:	
260 AIRSIDE DR MOON TOWNSHIP, PA 15108					
Current Mailing Address:			New Maili	New Mailing Address:	
260 AIRSIDE DR MOON TOWNSHIP, PA 15108					
FEI Number: 25-1570566 FEI Number Applied For ( ) FEI Num			umber Not Appl	licable ( ) Certificate of Status Desired ( )	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 US					
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:					
	Electroni	c Signature of Registered Agent		Date	
OFFICERS AND DIRECTORS:			ADDITION	IS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PCEO ( ) AGBEDE, ROBE 260 AIRSIDE DE MOON TOWNSE	₹	Title: Name: Address: City-St-Zip:	PCEO (X) Change ( ) Addition AGBEDE, ROBERT O 260 AIRSIDE DR MOON TOWNSHIP, PA 15108	
Title: Name: Address: City-St-Zip:	D () BERKEY, EDGA 6203 LANDING MOON TOWNSH	LANE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () SPENCER, GRE 1020 DEVONSH PITTSBURGH, F	IRE ROAD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () MILES, GEORG 4802 FIFTH AVE PITTSBURGH, F	<b>:</b>	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	T () JOHNSON, TOM 260 AIRSIDE DE MOON TOWNSE	RIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	` '		Title: Name: Address: City-St-Zip:	VP (X) Change () Addition ALKHAYRI, HASAN R P.E. 88 EAST BROAD STREET- SUITE 1980 COLUMBUS, OH 43215 US	

I hereby certify that the information supplied with this filing does not qualify 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: ROBERT O. AGBEDE PCEO 11/04/2009