2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 14, 2009
Secretary of State

DOCUMENT# F05000002249

Entity Name: WOOD GROUP TURBINE CONTROL SERVICES, INC.

Current Principal Place of Business:

591 WEST 66TH STREET
LOVELAND, CO 80538

New Principal Place of Business:

Current Mailing Address:

591 WEST 66TH STREET
LOVELAND, CO 80538

New Mailing Address:

FEI Number: 30-0114263 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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:	D	( ) Delete
Name:	ANGUS, JON	
Address:	ESKER HOUSE, CRAIGSHAW DRIVE	
City-St-Zip:	ABERDEEN, UK AB12 3AX UK	
Title:	PD	( ) Delete
Name:	HUVAL, STEVEN	
Address:	591 WEST 66TH STREET	
City-St-Zip:	LOVELAND, CO 80538	
Title:	S	(X) Delete
Name:	HIRST, DAVID	
Address:	17420 KATY FREEWAY, SUITE 300	
City-St-Zip:	HOUSTON, TX 77094	
Title:	T	( ) Delete
Name:	SCHWARTZ, GARY	
Address:	591 WEST 66TH STREET	
City-St-Zip:	LOVELAND, CO 80538	
Title:	AS	( ) Delete
Name:	SPROULE, LORRAINE	
Address:	17420 KATY FREEWAY, SUITE 300	
City-St-Zip:	HOUSTON, TX 77094	
Title:	AS	( ) Delete
Name:	WIDLASKI, DOUGLAS	
Address:	17420 KATY FREEWAY, SUITE 300	
City-St-Zip:	HOUSTON, TX 77094	

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
Name:	
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 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: LORRAINE SPROULE AS 01/14/2009

Electronic Signature of Signing Officer or Director — Date