

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000001349

FILED  
Jan 04, 2010  
Secretary of State

**Entity Name:** LITTLEJOHN ENGINEERING ASSOCIATES, INC.

**Current Principal Place of Business:**

1935 21ST AVENUE SOUTH  
NASHVILLE, TN 37212

**New Principal Place of Business:**

**Current Mailing Address:**

1935 21ST AVENUE SOUTH  
NASHVILLE, TN 37212

**New Mailing Address:**

**FEI Number:** 62-1526480

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

STARK, CHUCK  
986 DOUGLAS AVENUE  
SUITE 100  
ALTAMONTE SPRINGS, FL 32715 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:** PD  
**Name:** LITTLEJOHN, JAMES H  
**Address:** 1935 21ST AVENUE SOUTH  
**City-St-Zip:** NASHVILLE, TN 37212

**Title:** SD  
**Name:** HEINZE, JEFFREY D  
**Address:** 1935 21ST AVENUE SOUTH  
**City-St-Zip:** NASHVILLE, TN 37212

**Title:** D  
**Name:** PIERCY, DONALD P  
**Address:** 1935 21ST AVENUE SOUTH  
**City-St-Zip:** NASHVILLE, TN 37212

**Title:** D  
**Name:** DAVIS, THOMAS J  
**Address:** 1935 21ST AVENUE SOUTH  
**City-St-Zip:** NASHVILLE, TN 37212

I hereby 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 all other like empowered.

**SIGNATURE:** JAMES H. LITTLEJOHN

PRES

01/04/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date