

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000004754

FILED
Jan 11, 2012
Secretary of State

Entity Name: BALA CONSULTING ENGINEERS, INC.

Current Principal Place of Business:

443 SOUTH GULPH ROAD
KING OF PRUSSIA, PA 19406

New Principal Place of Business:

Current Mailing Address:

443 SOUTH GULPH ROAD
KING OF PRUSSIA, PA 19406

New Mailing Address:

FEI Number: 23-2213319

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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

OFFICERS AND DIRECTORS:

Title: CPD
Name: ANASTASIO, PE, MICHAEL G
Address: 443 SOUTH GULPH ROAD
City-St-Zip: KING OF PRUSSIA, PA 19406

Title: CEO
Name: ANASTASIO, PE, MICHAEL G
Address: 443 SOUTH GULPH ROAD
City-St-Zip: KING OF PRUSSIA, PA 19406

Title: DVPD
Name: HUDSON, HENRY W
Address: 443 SOUTH GULPH ROAD
City-St-Zip: KING OF PRUSSIA, PA 19406

Title: COO
Name: HUDSON, HENRY W
Address: 443 SOUTH GULPH ROAD
City-St-Zip: KING OF PRUSSIA, PA 19406

Title: EVP
Name: KENSKY, PE, CHARLES B
Address: 443 SOUTH GULPH ROAD
City-St-Zip: KING OF PRUSSIA, PA 19406

Title: EVP
Name: REUSCHE, THOMAS M
Address: 443 SOUTH GULPH ROAD
City-St-Zip: KING OF PRUSSIA, PA 19406

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: MICHAEL G ANASTASIO

CEO

01/11/2012

Electronic Signature of Signing Officer or Director

Date