

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F11000000498

**FILED**  
**Feb 07, 2012**  
**Secretary of State**

**Entity Name:** HAL-PE ASSOCIATES/ENGINEERING SERVICES, INC.

**Current Principal Place of Business:**

832 SCOTT BLVD  
COVINGTON, KY 410112447

**New Principal Place of Business:**

**Current Mailing Address:**

832 SCOTT BLVD  
COVINGTON, KY 410112447

**New Mailing Address:**

**FEI Number:** 47-0947814

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SCHMIDT, RICHARD C  
4012 LONG LAKE DRIVE SOUTH  
ELLENTON, FL 34222 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:** CP  
**Name:** GOSNEY, DEAN R  
**Address:** 832 SCOTT BLVD  
**City-St-Zip:** COVINGTON, KY 410112447

**Title:** VCV  
**Name:** LUNG, HOWARD A  
**Address:** 832 SCOTT BLVD  
**City-St-Zip:** COVINGTON, KY 410112447

**Title:** DS  
**Name:** GOSNEY, SHANE M  
**Address:** 832 SCOTT BLVD  
**City-St-Zip:** COVINGTON, KY 410112447

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:** HOWARD A. LUNG

VCVP

02/07/2012

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

\_\_\_\_\_  
Date