2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000001854

Entity Name: RALPH C. TYLER, P.E., P.S., INC.

FILED Apr 29, 2009 Secretary of State

| Current Principal Place of Business: | | | New Princ | New Principal Place of Business: | |
|---|--------------------------------------|----------------------------------|---|--|--|
| STE 200 | STER AVE ND, OH 44114 | ı | | | |
| Current Mailing Address: | | | New Mailing Address: | | |
| STE 200 | STER AVE ND, OH 44114 | i. | | | |
| FEI Number: | : 34-1558292 | FEI Number Applied For () | FEI Number Not Appl | icable () Certificate of Status Desired () | |
| Name and | Address of C | urrent Registered Agent: | Name and | Address of New Registered Agent: | |
| | JOHN C FOAKLAND P LM BEACH, FL | | | | |
| | named entity : e of Florida. | submits this statement for the p | urpose of changing i | ts registered office or registered agent, or both, | |
| SIGNATUR | RE: | | | | |
| | Electror | ic Signature of Registered Age | nt | Date | |
| Election Car | npaign Financin | g Trust Fund Contribution (). | | | |
| OFFICERS AND DIRECTORS: | | | ADDITION | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | |
| Title: Name: Address: City-St-Zip: | TYLER, RALPH | R AVE., STE 200 | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | RICHMAN, BRI | R AVE. STE. 450 | Title: Name: Address: City-St-Zip: | S (X) Change () Addition RICHMAN, BRIAN 1120 CHESTER AVE., STE. 450 CLEVELAND, OH 44114 | |
| Title: Name: Address: City-St-Zip: | KNIGHT, JR, R | R AVE., STE 200 | Title: Name: Address: City-St-Zip: | PT D (X) Change () Addition KNIGHT, JR, RAYMOND L 1120 CHESTER AVE., STE 200 CLEVELAND, OH 44114 | |
| Title: Name: Address: City-St-Zip: | LOUIS, OVERS | R AVE., STE 200 | Title: Name: Address: City-St-Zip: | D (X) Change () Addition OVERSTREET, E. LOUIS 1120 CHESTER AVE., STE 200 CLEVELAND, OH 44114 | |
| Title: Name: Address: City-St-Zip: | SAUNDERS, AF | R AVE., STE 200 | Title: Name: Address: City-St-Zip: | ()Change ()Addition | |

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: RALPH S. TYLER CMD 04/29/2009