

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000002902

Entity Name: PND ENGINEERS, INC.

FILED
Mar 23, 2009
Secretary of State

Current Principal Place of Business:

1506 WEST 36TH AVENUE
ANCHORAGE, AK 995033612

New Principal Place of Business:

Current Mailing Address:

1506 WEST 36TH AVENUE
ANCHORAGE, AK 995033612

New Mailing Address:

FEI Number: 92-0072819

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: NOTTINGHAM, DENNIS
Address: 2107 SORBUS WAY
City-St-Zip: ANCHORAGE, AK 99503

Title: VDST () Delete
Name: KENLEY, DOUG
Address: 9960 E. PUFFIN DRIVE
City-St-Zip: PALMER, AK 99645

Title: VD () Delete
Name: HARTLEY, MICHAEL
Address: 8410 BENOTHO PLACE
City-St-Zip: MERCER ISLAND, WA 98040

Title: VD () Delete
Name: PIERCE, DAVID M
Address: 9403 CAPSTAN DRIVE
City-St-Zip: BAINBRIDGE ISLAND, WA 98110

Title: VD () Delete
Name: GUNDERSON, WILLIAM
Address: 1169 WING POINT WAY NE
City-St-Zip: BAINBRIDGE ISLAND, WA 98110

Title: VD () Delete
Name: NOTTINGHAM, TODD
Address: 9208 N.E. SEA RAY PLACE
City-St-Zip: BAINBRIDGE IS., WA 98110

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:

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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: DOUG KENLEY

VDST

03/23/2009

Electronic Signature of Signing Officer or Director

Date