

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000004522

FILED  
Mar 19, 2009  
Secretary of State

Entity Name: GILES ENGINEERING ASSOCIATES, INC.

## Current Principal Place of Business:

N8 W22350 JOHNSON DRIVE  
A1  
WAUKESHA, WI 53186

## New Principal Place of Business:

## Current Mailing Address:

N8 W22350 JOHNSON DRIVE  
A1  
WAUKESHA, WI 53186

## New Mailing Address:

FEI Number: 39-1318935

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ZICK, TERRANCE J PE  
4155 ST. JOHNS PARKWAY  
1200  
SANFORD, FL 32771 US

## Name and Address of New Registered Agent:

KROENKE, MICHAEL D  
4155 ST. JOHNS PARKWAY  
1200  
SANFORD, FL 32771 US

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: MICHAEL D. KROENKE

03/19/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PCD ( ) Delete  
Name: GILES, TERRY L  
Address: N8 W22350 JOHNSON DR, STE A1  
City-St-Zip: WAUKESHA, WI 53186

Title: V ( ) Delete  
Name: REUTEMAN, PATRICK D  
Address: N8 W22350 JOHNSON DR STE A1  
City-St-Zip: WAUKESHA, WI 53186

Title: SEC ( ) Delete  
Name: GILES, JOYCE A  
Address: N8 W22350 JOHNSON DR, STE A1  
City-St-Zip: WAUKESHA, WI 53186

## 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:

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: JOYCE A. GILES SECRETARY TREASURER

MS.

03/19/2009

Electronic Signature of Signing Officer or Director

Date