

**2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Jan 17, 2011  
Secretary of State**

DOCUMENT# N06000000215

**Entity Name:** ENGINEERED TRAINING INSTITUTE, INC.

**Current Principal Place of Business:**

2544 STONEVIEW RD.  
ORLANDO, FL 32806

**New Principal Place of Business:**

**Current Mailing Address:**

2544 STONEVIEW RD.  
ORLANDO, FL 32806

**New Mailing Address:**

**FEI Number:** 20-4402566      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 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: PD  
Name: TREWEEK, LAUREL R  
Address: 1200 TANAGER RD.  
City-St-Zip: ORLANDO, FL 32803

Title: VD  
Name: O'BRYANT, ELAINE A  
Address: 1416 ORIOLE AVE.  
City-St-Zip: ORLANDO, FL 32803

Title: STD  
Name: THORPE, BURT  
Address: 2544 STONEVIEW RD.  
City-St-Zip: ORLANDO, FL 32806

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: B.W. THORPE

STD

01/17/2011

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

\_\_\_\_\_  
Date