

# **2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P03000082127

**FILED**  
**Apr 10, 2008**  
**Secretary of State**

**Entity Name:** ENGINEERING CAD SERVICES, INC.

**Current Principal Place of Business:**

10150 HIGHLAND AMNOR DRIVE  
SUITE 200  
TAMPA, FL 33610

**New Principal Place of Business:**

**Current Mailing Address:**

10150 HIGHLAND AMNOR DRIVE  
SUITE 200  
TAMPA, FL 33610

**New Mailing Address:**

**FEI Number:** 26-2374831

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WELLS, RICHARD  
10150 HIGHLAND AMNOR DRIVE  
SUITE 200  
TAMPA, FL 33610 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: P ( ) Delete  
Name: FLEMING, RONALD W JR  
Address: 848 MAPLE RIDGE DR  
City-St-Zip: BOARDMAN, OH 44512

Title: T ( ) Delete  
Name: STEVENS, ROBERT  
Address: 132 EASTWING DRIVE  
City-St-Zip: WARREN, OH 44484

Title: VP ( ) Delete  
Name: PETKOVICH, ELLA  
Address: 904 BRENTWOOD POINTE  
City-St-Zip: BRENTWOOD, TN 37027

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: TR (X) Change ( ) Addition  
Name: STEVENS, ROBERT  
Address: 132 EASTWING DRIVE  
City-St-Zip: WARREN, OH 44484

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: RONALD FLEMING

P

04/10/2008

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

\_\_\_\_\_  
Date