

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000093135

FILED
Feb 17, 2009
Secretary of State

Entity Name: CRAIN ATLANTIS ENGINEERING, INC.

Current Principal Place of Business:

210 SW NATURA AVENUE
DEERFIELD BEACH, FL 33441 US

New Principal Place of Business:

Current Mailing Address:

210 SW NATURA AVENUE
DEERFIELD BEACH, FL 33441 US

New Mailing Address:

210 SW NATURA AVENUE
DEERFIELD BEACH, FL 33441 US

FEI Number: 20-5284753

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PETROCELLI, GEORGE M
2361 NW 30TH STREET
BOCA RATON, FL 33431 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: P () Delete
Name: CAPELLINI, ALBERT R P
Address: 2549 LAKE DRIVE
City-St-Zip: DEERFIELD BEACH, FL 33442 US

Title: VPT () Delete
Name: PETROCELLI, GEORGE M VP-T
Address: 2361 NW 30TH STREET
City-St-Zip: BOCA RATON, FL 33431 US

Title: VP () Delete
Name: MCVAY, JOSEPH K VP
Address: 3225 CRAYTON ROAD
City-St-Zip: NAPLES, FL 34103 US

Title: VP () Delete
Name: HAIG, ROBERT B VP
Address: 720 KENDALL DRIVE
City-St-Zip: MARCO ISLAND, FL 34145 US

Title: VPS () Delete
Name: LAMIA, MARIANO P VP-S
Address: 700 NE HARBOUR TERRACE
City-St-Zip: BOCA RATON, FL 33431 US

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:

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: ALBERT R. CAPELLINI

P

02/17/2009

Electronic Signature of Signing Officer or Director

Date