

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 12, 2003 8:00 am
Secretary of State

02-12-2003 90100 046 ***158.75

DOCUMENT # P14394

1. Entity Name

SANDWELL ENGINEERING INC.



Principal Place of Business

2690 CUMBERLAND PARKWAY
SUITE 300
ATLANTA GA 30339

Mailing Address

2690 CUMBERLAND PARKWAY
SUITE 300
ATLANTA GA 30339

2. Principal Place of Business

2400 Lake Park Drive

3. Mailing Address

2400 Lake Park Drive

Suite, Apt. #, etc.

200

Suite, Apt. #, etc.

200

City & State

Smyrna, GA

City & State

Smyrna, GA

Zip

30080

Country

USA

Zip

30080

Country

USA

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number

93-0470684

Applied For

Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election: Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☐ Delete
NAME PYATT, ALAN
STREET ADDRESS 666 BURRARD STREET
CITY-ST-ZIP VANCOUVER, B COLUMBIA

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE S ☐ Delete
NAME GREENFIELD, JOHN
STREET ADDRESS 990 HAMMOND DR., STE. 650
CITY-ST-ZIP ATLANTA GA

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE A S ☐ Delete
NAME URSEL, DALE
STREET ADDRESS 666 BURRARD STREET
CITY-ST-ZIP VANCOUVER B.

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE V ☐ Delete
NAME TOMSULA, JOSEPH P
STREET ADDRESS 2690 CUMBERLAND PARKWAY, SUITE 300
CITY-ST-ZIP ATLANTA GA 30339

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 2400 Lake Park Dr., Suite 200
CITY-ST-ZIP Smyrna, GA 30080

TITLE V ☐ Delete
NAME GRIFFIN, W. LAMAR
STREET ADDRESS 2690 CUMBERLAND PARKWAY, SUITE 300
CITY-ST-ZIP ATLANTA GA 30339

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 2400 Lake Park Drive, Suite 200
CITY-ST-ZIP Smyrna, GA 30080

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

Lamar Griffin 2/10/03

770-433-9336

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)