

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P34149

FILED  
Jan 20, 2011  
Secretary of State

**Entity Name:** POWER ENGINEERS, INCORPORATED

**Current Principal Place of Business:**

3940 GLENBROOK DRIVE  
HAILEY, ID 83333

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1066  
HAILEY, ID 83333

**New Mailing Address:**

**FEI Number:** 82-0324246

**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 32301 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: DP  
Name: HAND, JACK  
Address: 3940 GLENBROOK DR.  
City-St-Zip: HAILEY, ID 83333

Title: CB  
Name: POLLOCK, RANDALL L  
Address: 3940 GLENBROOK DR.  
City-St-Zip: HAILEY, ID 83333

Title: DT  
Name: JAMES, JANIS  
Address: 3940 GLENBROOK DR.  
City-St-Zip: HAILEY, ID 83333

Title: DV  
Name: CAVANAUGH, JOHN L  
Address: 3940 GLENBROOK DRIVE  
City-St-Zip: HAILEY, ID 83333

Title: DV  
Name: GRASS, RANDY  
Address: 12755 OLIVE BLVD. SUITE 100  
City-St-Zip: ST. LOUIS, MO 63141

Title: S  
Name: NEIWERT, BARRY  
Address: 3940 GLENBROOK DRIVE  
City-St-Zip: HAILEY, ID 83333

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

SIGNATURE: JANIS JAMES

DT

01/20/2011

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

\_\_\_\_\_  
Date