

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P34354

FILED  
Jan 14, 2010  
Secretary of State

**Entity Name:** TOM GREEN & COMPANY ENGINEERS, INC.

**Current Principal Place of Business:**

3701 EXECUTIVE CENTER DR., SUITE 258  
AUSTIN, TX 78731

**New Principal Place of Business:**

**Current Mailing Address:**

3701 EXECUTIVE CENTER DR., SUITE 258  
AUSTIN, TX 78731

**New Mailing Address:**

**FEI Number:** 74-2588219

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION, FL 33324 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  
Name: GREEN, TOM  
Address: 10802 WINDRIDGE DR  
City-St-Zip: AUSTIN, TX 78759

Title: S  
Name: GREEN, HEIDI  
Address: 10802 WINDRIDGE DR  
City-St-Zip: AUSTIN, TX 78759

Title: VP  
Name: THOMPSON, TOD  
Address: 3918 BALCONES DR.  
City-St-Zip: AUSTIN, TX 78731 US

Title: T  
Name: LABUNSKI, CAMERON  
Address: 7004 NARROW OAK TRAIL  
City-St-Zip: AUSTIN, TX 78759 US

Title: VP  
Name: DAVIDSON, JOHN  
Address: 2303 WILLOW WAY  
City-St-Zip: ROUND ROCK, TX 78664 US

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:** HEIDI GREEN

SECR

01/14/2010

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

\_\_\_\_\_  
Date